

DOCTOR OF PHILOSOPHY

Ageing & Exercise

a case study to explore perceptions of ageing and engagement with exercise

Stuart, Sue

Award date:
2018

Awarding institution:
Coventry University
Buckinghamshire New University

[Link to publication](#)

General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of this thesis for personal non-commercial research or study
- This thesis cannot be reproduced or quoted extensively from without first obtaining permission from the copyright holder(s)
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal

Take down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Ageing & Exercise: a case study to explore perceptions of ageing and engagement with exercise

By

Sue Stuart

**A thesis submitted in partial fulfilment of the
University's requirements for the degree of Doctor of
Philosophy**

May, 2018

Bucks New University

Coventry University

This copy of the thesis has been supplied on condition that anyone who consults it is understood to recognise that its copyright rests with its author under the terms of the United Kingdom Copyright Acts. No quotation from the thesis and no information derived from it may be published without proper acknowledgement.

Dedication

The thesis is dedicated to the memory of a wonderful lady: Paddy Keen (1929 -2013); former colleague, loyal friend and mentor who believed in me; supported me through some terrible times and encouraged me to pursue academic research.

Abstract: Ageing & Exercise: a case study

This study concerns the lived experience of participants in 50+ exercise groups (mainly women) that are taught by the researcher who is herself 50+. Activities comprise Exercise to Music, Pilates and Tai Chi for Arthritis and most classes are run under the auspices of an Adult Learning scheme. The research explores the meanings which people attach to the processes of ageing and how these relate to their engagements with exercise. The work was stimulated by a desire to understand the factors that encourage the participants to engage in and adhere to exercise and, in so doing, to make useful recommendations for health promotion and service provision with the intention that others might avoid the dangers of sedentary behaviour.

This ethnographic case study spans approximately four years beginning in the spring of 2013. It draws on data collected in five semi-structured interviews and ten focus groups that were recorded and transcribed and five shorter telephone interviews which were noted at the time. Also included are data from numerous short vox pops and interviews 'on the move'. Altogether 56 individuals contributed verbal comment that has been recorded in some way. The data are reinforced by participant observation and access to enrolment documents. All of this is supported by a field journal which creates an audit trail and traces the evolution of the study.

The originality of the study lies in the ability of the researcher to open up the 'black box' of the exercise class to reveal what matters most to older adults when they engage in exercise and how the contents of the box are socially constructed. Drawing on her own life experience as an exerciser and as an educator, the researcher is in a unique position to relate to the participants both as a peer and as a professional.

The study situates perceptions of ageing in the context of identity formation. It explores elements across the life course which have shaped those perceptions and how such perceptions intersect with values and beliefs about exercise and, furthermore, how they continue to do so. Through unpacking the 'black box' of the exercise class, findings demonstrate the existence of a 'package' of elements that individuals require in their

exercise: some essential, others desirable and yet others totally unacceptable. Factors which are considered essential vary with the choice of exercise but there remains an overwhelming sense of agreement that whatever is chosen should be pleasurable and co-constructed in partnership with other people. How this occurs forms the major contribution to knowledge which may be valuable in its application to provision, instructor recruitment and training for older adult exercise classes. Though the knowledge arises specifically from the participants of this case study it has relevance in informing exercise provision for similar groups of people.

List of Figures

Figure 1: Issues of Selfhood and Historical Stages (Baumeister, 1987)	P.25
Figure 2: Item wording and domains for CASP19	P.70
Figure 3 Questions for measuring personal Wellbeing from Annual Population Survey 2011 onwards.	P.71
Figure 4 Andragogy: 'the art and science of helping adults learn' (Knowles, 1980, p.45) P.195	
Figure 5: A diagram to show the generic factors of the package and how they are constituted through particular forms of teaching and learning strategies.	P. 207

List of Acronyms

ACSM	American College of Sports Medicine
ADNFS	Allied Dunbar National Fitness Survey
AL	Adult Learning
BHF	British Heart Foundation
CC	Community Centre
CMO	Chief Medical Officer(s)
ETM	Exercise to Music
FG	Focus Group
FJ	Field Journal
GDP	Gross Domestic Product
HSE	Health Survey England
ILP	Individual learning plan
Int.	Interview
LSC	Learning Skills Council
PAR-Q	Physical Activity Readiness Questionnaire

Pil. Pilates

PO Participant Observation

RARPA Recognising and reporting progress and achievement

ONS Office for National Statistics

SMART Specific, measurable, achievable, realistic and time-related

SWB Subjective Wellbeing

TC Tai chi

WHO World Health Organisation

Publications resulting from this thesis

Older Women, Exercise to Music, and Yoga: Senses of Pleasure? (2016) Barbara Humberstone and Sue Stuart *Journal of Aging and Physical Activity* 24, 412 – 418

A Qualitative Study in Ageing and Exercise (2016) Sue Stuart. In *Ageing, Physical Activity, Recreation and Wellbeing* Barbara Humberstone and Maria Konstantaki (eds.) Newcastle-upon-Tyne: Cambridge Scholars Publishing

Conference presentations resulting from this thesis

Stuart, S. A. (April, 2014) The origins of my study and why it's important *Hidden Gerontologists* London: King's College

Stuart, S. A. (June, 2014) A Qualitative Study in Ageing and Exercise *Conference on Ageing Well* High Wycombe: Bucks New University

Stuart, S. A. (September, 2014) Exercise50+: What does this mean? *Annual Conference of the British Gerontological Society*, University of Southampton

Stuart, S. A. (July, 2015) Research impact: Ageing and engagement with exercise *Postgraduate conference* Stoke-on-Trent: University of Staffordshire.

Stuart, S. A. (July 2015) Pleasure and Physical Activity 50+: Perceptions of an Exercise Instructor *Annual Conference of the British Gerontological Society*, Universities of Northumbria and Newcastle-upon-Tyne,

Stuart, S. A. (July, 2016) PHEW! Pathways to Health, Exercise and Wellbeing 3rd *ISA Forum of the International Sociological Association* Vienna

Acknowledgements

My first and most sincere thanks go to Professor Barbara Humberstone who has been a constant source of inspiration, guidance and support. The experience of working together is very enjoyable. Dr. Ben Clayton's critical comments and support in the latter part of the endeavour have been very much appreciated. I thank you for your incisiveness and candour.

The companionship of my furry friend, Guinness, who sat by me, on my lap and in front of the computer screen has made a major contribution to the writing process: lost just before his 19th birthday and sadly missed in the latter stages of production.

I thank my friend, Liz, for her constant interest in the research and the walks with Bess on Sundays, obliging me to take a break. Thanks to Sue and Tom for just being there, supporting me from a distance and not pressurising me. Thanks also to Sue C. for her interest and the lunches – may there be many more now. Not forgetting the love from George that was extended from the other side of the 'Pond'. Lastly thanks to Kevin who maintained my computer and rescued it at the Eleventh Hour!

To the administrative team and library staff of the university I extend my thanks for your help, interest, support and encouragement. Your help in overcoming problems was invaluable.

Lastly I extend my warmest good wishes and thanks to all the participants of my exercise classes past and present for their interest in the project and their willingness to contribute. Together I believe we have produced something worthwhile.

Contents

Dedication.....	ii
Abstract: Ageing & Exercise: a case study	iii
List of Figures	v
List of Acronyms.....	v
Publications resulting from this thesis	vii
Conference presentations resulting from this thesis	vii
Acknowledgements	viii
Chapter One.....	1
1.1 Autobiographical positioning	1
1.2. Contextualising the problem.....	2
1.3. Framing the study	5
1.4. An overview of the thesis.....	7
Chapter Two: Personhood & the Self.....	10
2.1. Introduction	10
2.2. Classical conceptualisations of the self	15
2.2.1. The Platonic-Christian tradition	15
2.2.2. Descartes	15
2.3. Modern conceptualisations of the self.....	16
2.4. Towards the postmodern self	22
2.5. In summary	25
Chapter Three: Age & Ageing.....	28
Introduction	28
Part 1 Common discourses on ageing	28
3.1.1. Age as chronology	28
3.1. 2. Age and the Self	29
3.1.3. Age and the life course.....	29
3.1.4. The Third and Fourth Ages	30
3.1.5. Ageing and embodiment.....	33
3.1.6. Other perceptions of ageing	34
3.1.7. A socially constructed view of ageing	36
Part 2. Theories of ageing	38
3.2.1. The emergence of theory	38
3.2.2. Evolution	40

3.2.3. Masking theories of Ageing	40
3.2.4. The power of Social discourse	42
3.2. 5. Agelessness and ageism	46
3.2.6. Babyboomers	49
Part Three: Ageing Well. What is it?	50
3.3.1. Theoretical perspectives	50
3.3.2. Older people's views	52
3.3.3. A global perspective	53
3.3.4. Sharing the message of 'Ageing Well'	54
3.3.5. From point of view of marketing	55
3.3.6. Health promotion	56
3.3.7. Measuring 'wellness'	57
3.3.8. A holistic approach	60
Summary	61
Chapter Four: Engagements with Exercise	62
4.1. Introduction	62
4.2. Definitions: What is exercise?	63
4.3. Why is exercise important? Background to CMO guidelines on physical activity	63
4.4. Adopting a phenomenological approach	68
4.5. Bridging the gap from determinism to interpretivism	69
4.6. A phenomenological approach to wellbeing, pleasure, enjoyment.	72
4.7. The importance of a social dimension	76
4.8. Paradoxes and problems of provision	78
4.9. Summary	81
Chapter Five: Methodology	83
5.1. Introduction	83
5.2. The research aims, questions and objectives	83
5.3 The choice of Research Paradigm	84
5.4. The interpretative paradigm	85
5.5. The place of the positivist paradigm in this study	86
5.6. Ethnographic theory	88
5.7. The role of the researcher	89
5.8. Sampling	91
5.9. The sample	92

5.9.1. A socio-political and historical background to Adult Learning	93
5.9.2. Cultures of exercise.....	95
5.10. Ethics.....	95
5.11. The methods chosen and how they support the study	96
5.11.1. Participant observation	97
5.11.2. Semi-structured interviews and focus groups.....	98
5.11.3. Other methods.....	99
5.12. Data Collection.....	101
5.12.1. A springboard into the research.....	101
5.12.2. Developing involvement	102
5.13. Data Analysis.....	104
5.13.1. Reflexivity.....	104
5.13.2. Processing the data	105
5.14. Trustworthiness	108
5.15. Summary	110
Chapter 6: Exercise and the life course.....	112
6.1. Introduction	112
6.2. School days	112
6.3. 'Continuers', 'Rekindlers' and 'Late starters'.	117
6.4. The importance of social interaction	119
6.5. Exercise along the life course mediated by time and place	122
6.6. Time, place and enjoyment.....	126
6.7. Exercise perceived as therapy to offset current effects of ageing	128
6.8. What is a twenty-first century 'Active Life' for older adults?.....	131
6.9. Summary	134
Chapter Seven: Perceptions of ageing and exercise	136
7.1. Introduction	136
7.2. Mediators of the ageing self and society	136
7.3. Age is relative.....	138
7.4. Image and the social construction of the self	142
7.5. How exercise is conceptualised / the place of exercise	147
7.6. Summary.....	149
Chapter 8: Responsibilities and challenges of ageing well.	152
8.1. Introduction	152

8.2. Health and wellbeing	153
8.3. Coping with change.....	160
8.3.1. Retirement	161
8.3.2. Widowhood, negotiated identity and family responsibilities.....	168
8.4. Body awareness	170
8.5. Benefits of exercise	173
8.6. The nature of pleasure and exercise	175
8.7. Summary	179
Chapter Nine: The Context of Exercise	182
9.1. Introduction	182
9.2. Features of the Physical and Social Environment: the contents of the 'package'	184
9.3. How the package is created and maintained	191
9.4. The Meaning of Quality.....	196
9.5. Implications for provision	201
9. 6. Summary	203
Chapter Ten: Conclusion.....	205
10.1. Introduction	205
10.2. Perceptions of ageing and exercise.....	205
10.3. What I learnt	209
10. 4. Contribution to knowledge	212
10.5 Limitations of the research	214
10.6. Recommendations for further research.....	215
List of References.....	217
Appendix A.....	254
Appendix B: Adult Learning documents	260
Appendix C.....	273
Appendix D	279

Chapter One

The purpose of this thesis is to explore the meanings attached to ageing and exercise through the lived experience of participants in the Exercise to Music (ETM), Pilates and tai chi classes that I lead as their instructor. The thesis arises from my raised awareness of health and demographic conditions that resulted from training to be an exercise instructor for older adults and the desire to prolong optimum quality of life as an older person myself.

1.1 Autobiographical positioning

The diary entry in the box below attempts to capture the feelings which led to the actions and produced the knowledge in which the research was conceived.

How it all began

Wow! Early retirement? Me? I'm not ready yet! Another few years' mortgage to pay!!!

But it would be nice. What am I going to do? How am I going to stay fit and healthy without rushing around all over the place all day and every day? I won't be able to afford membership to a leisure centre. Besides gyms are boring. I'll need to meet people...but I need to earn some money too. I want to have fun doing something with other people like me. But what?

Well, it doesn't look particularly difficult standing in front of an aerobics class and telling everyone what to do. After all I'm a teacher. I ought to be able to learn how to do that easily enough. (Famous last words....)

Six years later

Having scaled my personal Everest and become as highly qualified as possible in my field to deliver exercise instruction to older people I now want to authenticate my work academically with a view to making my contribution to others as worthwhile as possible.

I began working for Adult Learning (AL) in Buckinghamshire, instructing a single ETM class in October 2006 and have taught a selection of classes covering ETM, tai chi and Pilates since then, including classes in residential settings and some for people with dementia. My research began in 2012 when I was teaching eight groups for AL across the three exercise cultures and an ETM community group set up in summer 2010, originally as a six week pilot for local people.

The case study itself grew out of a series of conversations with participant groups based on the significance of staying physically active and the desire to communicate the value of exercise to other older adults. There was also a certain disquiet expressed surrounding the heavy imposition of paperwork, the impact of this on administrative structure and its incursions on the time allotted for exercise. The study has attracted unmitigated support from members of the classes.

At the back of my mind the desire to find ways of attracting people to exercise was fired by the contention that if initiatives could be taken to encourage people into exercise before, or at the point of transition to, retirement, the impact upon sustaining health might be more cost-effective than supporting a return to health in rehabilitation classes later. In other words, that promoting a more physically active lifestyle could reduce the number of serious health incidents at a later stage. I was also concerned that the time we spent exercising together should be meaningfully spent.

1.2. Contextualising the problem

In UK in 1900 average life expectancy at birth was 47 years for men and 50 years for women (Lambert, 2017). Between 1991 and 2015 life expectancy for males aged 65 increased by 5.7 years (Office for National Statistics, 2017). In 1991 men could expect to live until the age of 73.4 years on average. In 2015 this became an average of 79.1 years (ONS, 2017). Women's average life expectancy in 1991 was already higher than that for men, placed at 82.8 years. Yet the increase by 2015 was smaller, placed at only 4 years, thus representing an increased life expectancy for women of 86.8 years (ONS, 2017). However figures for the estimated proportion of life post 65 that people can expect to spend in good health should also be taken into account, for they represent marginally more than half of that period. From an average of 18.8 years 65+ men can expect to spend an average of 10.6 in good health. Women whose average life expectancy 65+ is 21.2 years may spend on average 11.5 of those years free from morbidities (ONS, 2017).

Technological developments over the same time period have shaped the way that life is organised producing time for leisure and the growth of leisure pursuits. Many of the technological advancements had been aimed at stripping the drudgery from labour-centric tasks in the workplace and in the home rendering further freedom of choice over how to

spend leisure time available. However recent research into the effects of sedentary behaviour (Lee et al., 2012) suggests that the ability to freely embrace such seemingly enhanced lifestyle may not be entirely advantageous in preserving functional quality of life in later years. This is because the non-communicable diseases such as diabetes, cardiovascular disease and cancer traditionally associated with processes of ageing, are now being linked to sedentary lifestyle. Sport England (2016) represents a sedentary lifestyle as one in which an individual performs less than 30 minutes physical activity per week at moderate intensity. The logic suggests that physical activity which was formerly integral to lifestyle at the beginning of the twentieth century and which has been gradually displaced by changes in society over the course of that century could be reintegrated via judicious choice of leisure pursuits. Faced with a rapidly ageing population at the beginning of the twenty-first century the perceived benefits of encouraging people to engage with exercise have been seen as politically and economically desirable.

Currently we are living through a period where working life is being extended to account for the rising age profile of the population owing to the increase in births after the Second World War referred to as the 'Baby boomers' (Phillipson *et al.*, 2008) who are now reaching what was formerly state pension age. As opposed to interpreting population growth in terms of economic success (Walker, 2012), concerns abound over how the economy is going to sustain the rapidly increasing numbers of potential dependants of state pension age and above. In 1986 15% of the UK population was aged 65+. By the 2011 census this proportion had risen to 16.4% which accounts for 1:6 people at that time compared with 1:20 people over 65 in 1911 (BBC News UK, 2012). It is estimated that by 2045 almost a quarter (24.6%) of the UK population will be over the age of 65 (Office for National Statistics, 2012). Of the current 65+ population in 2012 almost 1% was over 90 representing 465,000 people and 12,320 of these were aged 100 or more (Office for National Statistics, 2013). Projections based upon these statistics and upon current rates of morbidities amongst older adults raise economic concerns that NHS and social care may not be able to sustain future demands on their services (Lee et al., 2012).

The benefits of engaging in physical activity have already been well demonstrated. Quantitative work shows that they are wide-reaching and multiple in nature. Community studies with previously sedentary older adults (Stewart *et al.*, 1993; Gardner *et al.* 2000;

Choi *et al.* 2005) have highlighted how weight-bearing exercise challenges balance and strengthens muscles, helping to prevent falls. Improved cognitive and emotional benefits have also been demonstrated (Grant and Kluge, 2007). According to O'Brien *et al.* (2002) active living is a worthy alternative to hormone replacement therapy in menopausal women. The practice of referring cardiac and stroke patients to exercise classes for rehabilitation also recognises the benefits of exercise in improving functionality and quality of life (Cutler-Riddick, 2010; King *et al.* 1989). The belief in the benefit of such exercise referral practices is demonstrated by some GP surgeries which provide 'green prescriptions' for patients identified as being able to benefit from increased physical activity (Carroll *et al.*, 2002; Hancock & Jenkins, 2003; Taylor, 2014). However, these studies also imply that being given the opportunity to engage in exercise is not sufficient in itself to stimulate uptake or to guarantee adherence. NICE (2010) reports on lack of uptake and adherence to exercise in the current GP prescribed schemes.

Qualitative studies with specialist groups e.g. people suffering from depression or loneliness, individuals rehabilitating after a medical event, have revealed that engaging in some form of exercise can influence one's self-perceptions by creating opportunities for social interaction, building social networks and thereby relieving depression – the antidote to the problems which may accompany the transition from work to retirement. These studies demonstrate the importance of factors such as enjoyment, challenge, fulfilment, autonomy (Stead *et al.*, 1997). The resultant improvements in emotional life are able to bring with them increased cognitive ability (Klusmann *et al.* 2012; Evers *et al.* 2011). They demonstrate that the benefits of engaging with physical activity extend beyond the physical limits of the body.

Current Chief Medical Officers' (CMO) guidelines regarding the amount of weekly physical activity which is sufficient to gain a health benefit are grounded in work conducted by the American College of Sports Medicine in the latter part of the twentieth century (Williams and Wilkins, 1995). They address the perceived need to reduce the incidence of heart disease and initially comprised 150 minutes of cardiovascular activity per week. The original work coincided with research to identify lifestyle factors which promoted 'successful ageing' (Rowe and Kahn, 1997) - factors associated with people who lived long and healthy lives.

Recent years have seen additional advice which recommends that two sessions of resistance training should be added to complement to aerobic exercise (Start Active, Stay Active, 2011). Concern about dementia has led to research focused on the ability of exercise to preserve executive function. Northey et al. (2017) found in a systematic review that 39 studies related to cognitive function in older adults support the importance of strength training in exercise interventions aimed at maintaining or improving cognitive function in adults over 50. Rizzuto et al. (2012) argue that behaviour change at any age can lead to improved quality of life and that including more physical activity in the lifestyle can have an even greater impact than stopping smoking or drinking immoderate amounts of alcohol. Nevertheless the British Heart Foundation (2015) reports that physical activity declines with age; that 36% men and 21% women 75+ in UK met the guidelines for exercise, while 46% men and 65% women 75+ in UK were considered to be inactive. Thus they were unable to access the benefits suggested by participation in exercise and could be compromising their chances to 'age successfully'.

It was within the context of this knowledge that the desire arose to discover the factors that attracted participants to my exercise classes and that encouraged them to continue their engagement. I hoped that wider recognition of these factors might serve to influence policies aimed at attracting more people 50+ into exercise. I was aware that studies on barriers and motivators to exercise already existed but I thought that my position as a peer who was simultaneously experiencing the processes of ageing and engagement with exercise herself might provide a significant, if not unusual, dimension to ethnographic study, since most research in this area is conducted by much younger people who do not yet have firsthand experience of the processes of ageing.

1.3. Framing the study

Having spent a career in teaching and educational management the whole context of the fitness industry, how it worked and its place in the socio-political and economic environment was new to me so I recognised that much preparatory work was indicated to be able to achieve the level of understanding necessary for making valid recommendations.

Awareness of, and respect for, the findings of the quantitative and qualitative work cited above was instrumental in creating my desire to pursue further research rather than the

desire to replicate it. The benefits of exercise become progressively evident to me in my role as exercise tutor working with groups where the membership is stable; attendance is regular and maintained over time without the need to measure them in any statistical or clinical way. I wanted to create a more detailed and nuanced account to make visible the lived experience of the participants. Consequently the inquiry addresses three questions:

- How are the processes of ageing perceived?
- How do these perceptions relate to engagement with exercise?
- What are the implications for social policy and the provision of exercise?

The third question is particularly significant for its ability to provide philosophical and strategic knowledge that might better underpin health promotion policies and practices. Encouraging people to take responsibility for their health has been seen to be a prominent strategy of social policy (Higgs *et al.* 2009) but the danger of this approach results in pathologising health instead of treating it as a natural state (Tulle, 2008a). The approach echoes the positivist methods that were initially used to identify the benefits of exercise and is implied in the guidelines for exercise aimed at enhancing health. For example many of the studies which provide evidence of specific health benefits follow the design of random controlled trials involving behaviour change and aim to establish evidence of the ability of exercise to bring improvement to, or relief from, specific conditions (Stewart *et al.*, 1993; Gardner *et al.* 2000; Choi *et al.* 2005; Klusmann *et al.* 2012; Evers *et al.* 2011). Under these conditions exercise is administered as though it were a medicine whose effects are measured objectively at the end of the trial but without provision for continuity. Statistics are produced and reported but no attention is paid to how these integrate with the continued lived experience of the people involved. This fragmented picture is reflected in national data.

While the British Heart Foundation (2015) reports that participation in physical activity declines with age other national surveys report a partial view of exercise indicating increases in participation as each makes reference to specific areas of interest e.g. National Travel Survey (2014), Sport England (2016). Caution is necessary when interpreting these results, not just because the criteria vary from survey to survey but because successive surveys from the same provider monitor different activities or in a different way. For

example Health Survey England (2012) only began to monitor walking as exercise in that year. Sport England (2016) was able to report 93% increase in exercise movement and dance but this was on the basis of only 30 minutes per week. Indeed instead of monitoring levels of sports participation that meet or exceed CMO recommendations the Sport England (2016) survey now focuses on monitoring the minimum amounts of participation (30 minutes per week). Thus these figures are now capable of taking into account people who might previously have been classified as sedentary. The change reflects concern produced following warnings from the World Health Organisation (Lee et al., 2012) signalling the link between inactivity and non-communicable diseases that are associated with ageing. These statistics suggest that 1:4 people globally are in danger of contracting non-communicable diseases as a result of their sedentary lifestyles (Lee et al. 2012).

Unfortunately such statistics have little to do with understanding the relationship between ageing and exercise and factors which might be more productive in suggesting ways of encouraging people to participate. Instead exercise is associated with health in a purely pathological sense (Tulle, 2008a) where the body is seen objectively. Phoenix and Grant (2009) warn that 'the older body is more than a stimulus-response machine' (p.366) and argue that greater understanding may be achieved by recruiting other paradigms and multiple approaches to gathering knowledge. As the authors say 'one size fits all, fits nobody' (p.373).

This study attempts to provide the type of in-depth detail of the lived experience of ageing and exercise that might contribute to a more holistic view. In this way the knowledge and understanding gained from it may subsequently be able to offer pointers towards how to increase the uptake of exercise amongst similar cohorts of older adults.

1.4. An overview of the thesis

In this introductory chapter I have attempted to describe the environment from which the research problem arises and to situate myself in relation to this environment. I take account of how others have conceptualised the problem. I pay heed to their work in framing an alternative approach aimed at contributing to knowledge. Finally I outline the parameters within which the case study exists.

Following this introduction there are three chapters which explore the literature. Chapters two and three investigate self and identity in relation to ageing. Chapter four involves an exposition of the notion of ageing well and takes account of how research contributes to developing social policy on wellbeing.

In the methodology chapter, chapter five, I explain my reasons for the choice of an ethnographic approach to inquiry and how this perspective makes accessible a broader sense of meaning and facilitates deeper understanding. Also in this chapter I detail the nature of the study sample, including a reasoned comparison of administrative arrangements for classes organised by AL and other providers; the methods used and the arrangements which promoted and constrained the research and the evolution of its trajectory. Ethical considerations are included and the iterative nature of the research is highlighted.

The findings of the ethnographic case study are discussed in chapters six, seven, eight and nine. In chapter six I take a life course perspective to ageing and exercise in order to investigate how former experience may have shaped current practice. In chapter seven I focus on how current perceptions of ageing connect with engagement in exercise for my participants. I develop this in chapter eight by focusing more directly on how responsibilities and challenges associated with ageing intersect with exercise. In all of these chapters I consider how current choice of exercise culture interacts with notions of self, identity, preference of exercise culture and previous experience. In chapter nine I discuss the context of current exercise classes and the conditions which structure them. I reflect upon educational theory, the teaching and learning strategies employed in the classes and the relational qualities of style, time and place that are valued. I discuss how these values interact with the meanings attached to the exercise experience, their conflict with administrative procedures and the implications that the ongoing reorganisation of Adult Learning (AL) have for future exercise provision. This chapter aims to illuminate the factors that lie at the core of a successful socially constructed learning experience which is reconstituted each time that groups meet to exercise. By uncovering the essential elements of an effective exercise session the study seeks to inform future exercise provision for older adults.

In the concluding chapter I trace how my personal learning journey as the research instrument intersects with that of my participants leading to the deeper understanding of the conditions in which it is framed. The story traces the path to deeper understanding and reinforces the findings that have produced an original contribution to knowledge. I detail the limitations to the research which are mainly due to the administrative context and the background of the participants. While some of the limitations contribute to the originality of the inquiry, others indicate how a similar inquiry might be conducted to effect further understanding.

Chapter Two: Personhood & the Self

2.1. Introduction

The purpose of this chapter is to provide a context in which to discuss ageing and the body. Just as the body is the essential pre-requisite for existence of the self it is also central to the ageing process and the ability to take exercise (Tulle, 2008b). Hence a sense of self may be expressed through the actions of the body. Whether and how this occurs may be theorised by interpretations of the relationship between body, ageing and self. The chapter traces how ideas of self, personhood, identity and embodiment have developed through history and now mesh in twenty-first century conceptualisations of the self in relation to the body.

To ask anyone what is meant by being a person the answer may seem self-evident. However the Oxford English Dictionary identifies seven distinct meanings. The first four are as follows:

1. A part played in a drama or in life; 2. An individual human being; 3. The living body of a human being; either a) the actual body as distinct from the clothing etc. or from the mind or soul, or b) the body with its clothing etc.; 4. *Law* A human being or body corporate or corporation having rights or duties recognised by law.

The last three have meanings in other specific contexts viz. theological, grammatical and zoological. The first four share some similarity in that they can all be applied to aspects of a human being as opposed to an animal or a machine. At the time of writing the state of consciousness is also attributed only to human beings and not to animals or machines (Bauman and Raud, 2015; Elliott, 2014).

While dictionary definitions provide a deterministic starting point for personhood they are not as useful in establishing meanings of the Self. Yet, as Elliott (2014, P.8) points out 'In day-to-day life, we implicitly assume, and act on the basis, that individuals have a "sense of self"'. Building on the work of Harré (1983) and Mauss (1985), Jenkins (2014, P.52) argues that the long-standing conventional understanding of the notions of 'person' and 'self' in scholarly literature distinguishes 'the private, internal self from the public, external person'. The claim suggests a dualistic nature to the sense of self where the person which is presented to the world is both the container and the vehicle for expression of self but is also a unitary entity. Harré (1998) argues that in contemporary writing the self is a fiction. It is the singularity that we feel ourselves to be but it is not an entity. Instead the entity is the

person and the self is a site 'from which a person perceives the world and a place from which to act' (P.3). Stevens (1996) suggests how this happens, by identifying ways in which the self is expressed through personhood. They are as follows:

1. To be a person involves *embodiment*, or being related to a particular body.
2. To be a person involves *subjective experience*: consciousness, some sense of self and of agency (the ability to initiate thought and actions). It also involves *cognition*: ways of processing and making sense of that experience.
3. To be a person is to be intrinsically related to others, to exist in a *social medium* of meanings and customs.
4. To be a person may also involve *unconscious feelings*, a sense that some of our experience and our reactions emanate from feelings deep within ourselves of which we may be hardly aware.
5. Finally, to be a person involves some sense of these strands being in complex *interrelation* with each other.

In summary for Stevens the self is embodied in the person and through the medium of the person is capable of acting agentially, associating and interacting with others in the context of society. Though interaction takes place at the level of consciousness its effects and affects operate at a deeper level. The complexity of the process suggests that the self of each individual is unique. There is some degree of consistency in the notion of the person through its link to the body but the self is capable of greater abstraction.

Scholars vary widely both now and in the past in the way that they approach an understanding of the self depending upon their attitude towards what counts as knowledge and how it may be accessed. Elliott (2014, P.15) argues 'No idea is more unstable, flexible or pliable in contemporary social theory than that of the self'. For the purposes of this study and for clarity, 'person', will refer to objective views of the individual e.g. rights, responsibilities, legal status. 'Self' expresses a subjective standpoint and requires a much closer examination for its multiplicity and width of conceptualisations.

This chapter establishes a background for data analysis by considering how the body relates to significant changes in conceptions of the self from classical times in Western Europe starting with a brief description of the Platonic-Christian tradition. By way of a simple point of reference Figure One (P.13) provides a historico-cultural background against which

changes in tradition and the sequence of evolution in thinking about and understanding the self can clearly be tracked. A brief discussion of traditional and emerging views of the Self in relation to the body is provided as a helpful precursor to exploring meanings of age and ageing.

Figure 1: Issues of Selfhood and Historical Stages (Baumeister, 1987: 164)

Some materials have been removed from this thesis due to Third Party Copyright. The unabridged version of the thesis can be viewed at the Lanchester Library, Coventry University.

Some materials have been removed from this thesis due to Third Party Copyright. The unabridged version of the thesis can be viewed at the Lanchester Library, Coventry University.

2.2. Classical conceptualisations of the self

2.2.1. The Platonic-Christian tradition

This study is set in the context of Western European culture and many of the participants are Christians. For this reason discussion about the self begins with the dualist approach traditionally adopted in the Platonic-Christian tradition (Oberg, 1996) where the mind, soul or self is seen to be superior to the body. In the Christian tradition throughout the life course the soul is imprisoned within the body and is liberated from it by death, though Christians seek moments of elucidation and transcendence through prayer. Thus the body is seen as mortal and the soul immortal, demonstrated by the ultimate symbol of Christ on the cross and his subsequent resurrection. These beliefs were fundamental to Cartesian thought about the self in the seventeenth century.

2.2.2. Descartes

A similar dualist, hierarchical approach was perpetuated with Descartes' 17th Century dictum, 'Cogito ergo sum', claiming that the self is located at the source of thought (Holstein & Gubrium, 2000). Cartesian logic sites consciousness in the existence of doubt. By equating doubt with the thought process Descartes arrived at the 'cogito'. By acknowledging that the ability to doubt constitutes a thought he was able to confirm his consciousness and his existence (Robinson & Groves, 1999). For Descartes the 'cogito' represents the basis for knowledge and social action. Sorabji (2006) criticises the Cartesian approach to certainty as being rather thin because the moment of certainty is limited to the duration of the thought. For Descartes the self or soul was immortal. Damage to the body could not affect the essential soul. Nevertheless the body remains an existential prerequisite and is the medium via which all experience is perceived (Toates, 1996). The view likens the body to a machine, subservient to the mind and forms the basis for the growth of a biomedical tradition (Howson, 2004) in which the body can be mapped and measured and reduced to object status. A biomedical approach still treats the body objectively, as a 'person', a separate entity or as part of the whole self. These approaches are resonant of Stevens' first aspect of personhood. Stevens' criteria also considers the importance of the way that individuals in society interact and establish shared views – a dimension replaced in a Cartesian context where the dominant Christian belief focused upon the relationship between an individual and God. It is a worldview which contrasts markedly with contemporaneous oriental

philosophies such as taoism which are based upon the natural unity and harmony in all things without reference to an omnipotent being. In the modern world It would be difficult for an individual to escape the impingements of society in today's pluralist, global society where such dominance or homogeneity of belief no longer exists (Gergen, 1991) and may account for the growing interest in eastern philosophies associated with activities such as yoga and tai chi.

Descartes' notion is essentially a reflective, philosophical perspective devoid of relation to existential experience and detached from social interaction (Soloman, 1988). Spawned at a time of colonisation, this is a Eurocentric view of the self, gathering ideological proportions, which is idealised, admits no possibility for individual difference and remains transcendental in nature following the Christian tradition (Solomon, 1988). It relates the self to its position in the world and the cosmos rather than to immediate society and lived experience. It suggests that the context of life is static and unchangeable; that knowledge is innate and finite and that the self is restricted by an individual's capacity for thought making no allowance for development.

The Cartesian formulation suggests that thought precedes action. In the twenty first century given instances of multi-tasking or complex operations such as driving a car where many of the manipulations appear to happen below the threshold of consciousness there would appear to be some closer link between the body and mind where the senses feed back information from the environment creating a circuit of information allowing the mind to react imperceptibly and make subtle adjustments which confront constantly changing states. The dualistic view of the self is perpetuated in the scientific tradition which takes an objective view of reality. Such a view can be operationalised to effect behaviour change in health promotion settings or to improve performance in competitive sport. However though this conceptualisation remains active in some modern circumstances, other views of self have evolved in conjunction with changes in society. Those will be explored in the next section.

2.3. Modern conceptualisations of the self

The impetus which led the way to thinking about the self in relation to society towards the end of the nineteenth century was provided by industrialization and urbanization. The

evolution of a socially-constructed self has its roots in reorganisation of social systems and roles and is accompanied by the phenomenon caused by Western cultural belief systems being thrown into question by Darwin's theory of evolution. Such fundamental shifts in society are reflected in the way that scholars start to think about behaviour, consciousness, the interaction between these two dimensions and the way that the self can be understood. Major influences are the work of William James and Pragmatists such as Mead, Cooley and Dewey, in U.S.A., and psychoanalysts such as Freud, in Europe. This section draws particularly on the work of Burkitt (2008) and Holstein and Gubrium (2000).

William James (1961 [1892]) began by recognising that it was possible to think of the self from a subjective point of view and an objective perspective in association with other people. He argued that consciousness could no longer be seen as belonging to an inner transcendental self but as an evolutionary product that enabled humans to adapt better to their environment. People are no longer driven by instinct or impulse nor respond mechanically to stimuli but are able to reflect upon competing demands and options presented to them and, in consequence, are able to choose how to react. Behaviour is embodied and, if habitual, often occurs without conscious thought as it is stimulated by the recruitment of established neural pathways. James argues that the natural plasticity of the human brain absorbs experience and is able to reapply it in other similar situations. Both consciousness and habit, and consequently self, are temporal because they are restricted to the time and space of a human life span. In this way they contribute to a continuing stream of consciousness which is always changing and accumulating experience. The present is continually becoming the past but consciousness allows us to reflect upon events and to project into the future.

Like Descartes James adopts a duplex view of self except that James' view is divided into the 'I' and the 'Me' where the two parts of self take part in a dialectic which enables the self to be mutable. However James sees no distinction between 'I' and 'me'. They are just terms of reference, aspects of the self which enable the individual to think about him/herself as in a soliloquy. Unlike Descartes he does not separate the body from the self as in the Cartesian formulation. Instead the view concerning the use of personal pronouns extends to include everything which is 'mine' e.g. possessions, clothes, parts of the body, friends, family and personal actions, for all are part of 'empirical' experience. This awareness and ability to

reflect upon the self allows the individual to change conduct to suit the exchange to the interlocutor, be it as a parent, spouse or boss. James (1961, [1892]: 46) commented 'a man has as many social selves as there are individuals that recognise him'. His view suggests a greater awareness of the sphere in which the individual interacts, but it is Mead who recognises that the individual's ability to reflect on behaviour in these interactions is significant in formulating a view of self.

Mead argued that one could only become aware of the nature of oneself in relation to other people and the way that they reacted to one's behaviour. Cooley (1902; 1964) described this phenomenon as akin to looking in a mirror where the reflection showed the individual what amendments were desirable or necessary. For Cooley this meant that the identity of self is a process which is always in a state of 'becoming' rather than 'being'. Mead recognised the potential of the opposing positions of 'I' and 'me' for the individual to reflect on and explore the nature of the self and to be able to consider actions reflexively. However, Mead's self has been criticised for being too rationalistic, conscious, cognitive and devoid of all emotion or passion. His approach tended to associate feeling with the physiological realm which could be separated off from the self. Elliott, (2014, P.50) comments that for Mead 'the self is a symbolic project which the individual actively constructs and develops in the context of engagement with familial figures and the "generalized other"'. In other words, for Mead, it little matters who the interlocutor may be. It is sufficient that there is some reaction from another human being in order to be able to gain a sense of self.

In his child development studies Mead argued that the self needed time to emerge. The consciousness that this involves is not limited to reason nor the cognitive processes but is embodied. Self is expressed through the actions and reactions of the body in relation with other people in the immediate environment. These observations highlight the pivotal importance of language, the meanings attached to specific expressions and the importance of shared meanings embedded in symbols and gestures. Mead argues that babies are not born with a sense of self and, along with Vygotsky (1962), posits that the sense of self develops from the social to the individual through language and mimesis. Vygotsky identifies a 'Zone of Proximal Development' within which children learn from those who are regularly in their proximity. The self becomes attuned to the demands and pressures of

society through initial interactions with parents and carers and begins to replicate the behaviour of 'the other' (Mead, 1934, 2015). Hence past experience plays a significant role in the constitution of the self.

Though a contemporary of the Pragmatists, Freud takes a different approach to the self arguing that it can only be partially known because much of past experience and the feelings that those experiences engendered were hidden deep within the self and were capable of causing emotional problems at times of crisis (Elliott, 2014). By comparison Mead's view of the way that self can be accessed is a lot more open. Freud's followers criticise Mead's view of self from the standpoint that it admits no recognition of conflict (Elliott, 2014). There is no recognition of the tension between individuals' desires, wishes and fantasies and the requirements for social control and cultural order. These views take on economic proportions later in the twentieth century with the development of subtle forms of advertising designed to appeal to the aspirational self. Blaikie (1999) comments on how in today's society advertisers target specific sectors of the market seeking to sell a lifestyle and from the point of view of the consumer specific lifestyles can be sought and bought. This notion of feelings being hidden or unconscious is also consistent with Stevens' (1996) fourth criterion for personhood. Mead's self is relational but does not take into account the larger structures of society. It is Giddens who does this much later in the twentieth century with his theory of 'structuration'. He argues that the self is socially constructed through the reciprocal interaction and constant iteration of individual agency and social structure.

The developments implied can be traced through the work of Blumer, one of Mead's students, who later organised and developed Mead's work on the use of symbols to imply meanings and how they are communicated under the title of Symbolic Interactionism (1969:1). The principle claims that individuals respond to the meanings they construct as they interact with one another. Blumer (1969) summarises three premises for Symbolic Interactionism which refer to aspects of meanings and their interpretation. Firstly 'that human beings act towards things on the basis of the meanings that the things have for them' (p.2). He argues that when something new is encountered, whether this is an object, person, activity or situation, meanings are ascribed to the novelty on the basis of prior experience or preconceptions. Secondly, these meanings arise from interaction with other people. Thirdly, that the meanings are constantly being interpreted and reviewed by the self

in company with others present and may go through several stages in the process of iteration.

This process can be compared to the hermeneutic circle. Originally the term was applied to interpreting ancient texts but adequately traces the shifts in meaning that occur as different people are involved in the interpretation process (Rennie, D. L., 2012; Lavery, S. M., 2003). As an aspect of phenomenology it could equally well describe the evolution in understanding of the self as a social entity that occurred during the half century that the Pragmatists were studying it.

The process of development of the self in relation to the other or as the individual within society was taken up later in the twentieth century by Goffman who, building upon Mead's work in child development, adopted a dramaturgical approach to the way that the individual is able to project or portray identity. He agreed with the Symbolic Interactionists but argued that the 'self itself does not derive from its possessor, but from the whole scene of his action' (p.252). His dramaturgical approach likened the actions of the self to a theatrical performance in which scripts were consciously selected or unconsciously used, postures adopted and scenes carefully set. Actors take account of the setting they find themselves in and respond accordingly. This is a much more agentic progression from the neural pathways recruited for habitual behaviour recognised by James. Goffman calls it 'the interaction order' (1967) where the interaction involved is far more predictive of and influential to the outcome of the exchange for the self.

Goffman argues that not only are we able to adjust our behaviour to fit in with other people's reactions to us but that we are able to project a persona or alternative identity which may be other than the one we truly believe ourselves to be should the situation require it. Hence it is possible to 'own' or 'be' a public self and a private self. For Goffman the concept of identity holds no 'same-ness' as is implied in the original etymological meaning of 'identity' via its root with 'identical' e.g. as in its application to 'twins'. In its ability to take on or to project different shades of identity the self is no longer immutable as implied by the Cartesian conception. The self is processual, as advocated by Cooley (1902; 1964)). By playing a part to suit the situation or 'frame' the individual is able to protect him/herself and avoid feelings of shame or censure (Goffman, 1959). Thereby the personal

or invisible self (Goffman, 1959) is sheltered and can emerge unscathed from the experience of exchange. In this way the self is seen to be flexible, resilient and capable of responding to myriad situations.

This freedom of expression is highlighted by default in Goffman's work 'Asylums' (1968b) where the institutionalised individual is stripped of the ability for self-expression and obliged to live within the strict rules and confines of the institution. In situations such as prisons or psychiatric hospitals which Goffman refers to as 'total institutions' every aspect of inmates' life is controlled. Hence the self can no longer be 'performed' because it has been 'programmed' (Goffman, 1968b). In reporting the degrading routines, humiliating rituals and requirement to defer to authority designed to erode an individual's sense of self Goffman is highlighting a moral dimension to personhood hinted at in Stevens' third aspect that relates to shared social meanings.

Two major inter-related themes emerge from Goffman's work: that of identity and that of the routines and rituals of everyday interaction. For Goffman the individual has the ability to separate the private self from that which s/he chooses to project in a specific setting or 'frame'. The frames (Goffman, 1975) are ritualised settings located in time and space and characterised by meanings and rules that are rooted in early socialisation. In this latter respect they hark back to the work of Mead and Vygotsky. The individual's response to these situations is embodied and expressed through the medium of language, symbols and gesture. Stevens (1996) notes that embodiment also has a social side because people usually react to the person that they see and so make assumptions based upon superficial appearances. This is of particular significance in cases where common stereotypical assumptions intervene and have the effect of prejudicing the interaction e.g. stereotypes based upon disability, age, gender, class or ethnicity. Facial expression and body gestures accompany language in conveying a public sense of self in a negotiated interaction as the individual is involved in impression management (Goffman, 1969). It is as though the individual is a 'player' or actor who is performing in part of a drama.

Goffman's conception of the individual's ability to adopt a variety of personae in this way has been criticised for being a somewhat cynical and manipulative view of self. Macintyre, (1985) regards the process as one which reduces the self to a series of roles. However

Jenkins (2014) points out that these roles are not fixed but flexible and capable of responding dynamically as interaction ensues. Giddens (1984) focuses on the moral nature of Goffman's actors emphasising the importance of interpersonal trust, of tact, collusion, interactional damage limitation and repair. The actors want to appear creditable to others and to make a good impression. Hence the moral dimension is rooted in reciprocity.

2.4. Towards the postmodern self

Nevertheless there are limitations on Goffman's work in that it is couched in American culture; that the frames of everyday life are not integrated into larger social structures and it is not accompanied by a systematic body of theory (Jenkins, 2014). Rather it is Giddens who links agency and social structure in his theory of 'Structuration' (1984) and in so doing takes account of massive social change inherent in the formulation of the postmodern self. Giddens advocates the critical importance of reflexivity, originally mooted by the Pragmatists. Not only does the reflexive dialogue take place internally but it is also recursive in that individuals pursue internal discourse in relation to their actions, experiences and the social structures which surround them. As a result constant reflexive monitoring of aspirations in conjunction with the rapidly changing social environment made visible through the power of the media and accompanied by rampant consumerism is capable of overturning traditional ways of doing things (Elliott, 2014, P.48). Established values relating to family, gender and class are overturned in the process. In response to such forces and the rapid pace of change the self is not only flexible but becomes both reactive and proactive in maintaining a resilient interface with the structures of society (Giddens, 1990). Gergen (1991) coins the phrase 'saturated self' to denote that the self is firmly rooted in the conditions of contemporary society and becomes increasingly saturated with the multiple voices of humankind as people are bombarded by a plethora of images, information and opinions of others. He adds to this the term 'multiphrenia' to describe the impact of the frenetic pace of life upon the self and the way that individuals are constantly urged to reinvent themselves and to cope with projecting multiple manifestations of self.

The ability to manipulate time and place in everyday life has a major impact upon the pace of life and the way that self can be perceived, for example, in being able to maintain close relationships with friends or family who live in another country whilst remaining virtually ignorant of who lives next door (Burkitt, 2008). Fromm (1960) has linked the increasing

importance of clock time to the growth of capitalism so that time itself becomes a commodity and is indicative of, or implies, change.

The speed involved in the need to react instantaneously to stimuli in the modern world has implications for the way that the self can be understood retrospectively and Giddens insists that reflexivity is central to the construction of self (1991). This process of reflecting upon one's actions and decisions brings to mind Kierkegaard's (1813-1855) aphorism that life can only be understood backwards but has to be lived forwards. It suggests that the past is not immutable but can be reconceptualised in the present via the process of narrative so that selves can be reconstituted. Ryle (1949) supports the notion coining the term 'thick description' to indicate that the story is more than a description of events but enables the teller to make sense of the past and to understand his/her role in it. Primo Levi (1975), survivor of Auschwitz, says with perspicacity, 'Perfection belongs to narrated events, not to those we live'. His comment goes beyond Stevens' second aspect of the self which makes sense of subjective experience using cognition and demonstrates the resilience of the self to embrace change in an existential way.

Despite the newfound ability to manipulate the confines of time and space, to retell the past or to act in a virtual world other boundaries serve to confine or shape the self. For Bauman (2005) the freedom provided by the suspension of traditional time schedules, to communicate in the virtual world or to relocate is a fiction, though it may be seen as both a right and a duty. He argues that the majority of people are bound by working conditions and may be obliged to move house or work unsociable hours in order to earn a living. Such shifts are no longer a choice but an obligation. Hence the dictionary's fourth definition of a person, in legal terms, is operationalised. What may be seen as freedom is actually more to do with security and impacts upon the self as an uncertain future. Bröckling (2016) refers to the normative demands which serve to regulate behaviour in these contexts e.g. that it is now possible to be available 24/7. Craib (1998) argues that establishing norms or being obliged to act in a 'normotic' fashion (Bollas, 1987), devalues experience as the practice is based upon the assumption that cognition dominates our lives. Beck and Beck-Gernsheim (2002) points out that the putative 'emancipation' from traditional values produces a vacuum that is replaced by norms that are intended to demonstrate empowerment but actually restrict, confine and objectify the self into a 'person'. A dichotomy ensues between

how individuals conceptualise the self and how social structures frame the person through a series of norms in an attempt to promote effective action. The dichotomy can easily be seen in the difference between meanings that are expressed in surveys that collect 'Big Data' for use in policy making and the broader meanings expressed by individuals. Elliott (2014) comments upon how the speed-driven, information-age, global capitalism promotes more flexible forms of working but increases pressure and serves to erode the sense of self. His words echo Marx' view that in hitting work targets it is possible to miss the point of living. Traditions are overturned and emotional ties weakened. Gergen (2000) emphasises the importance of maintaining good quality relationships to aid the survival of the self beyond that of an individual who is totally defined by paid employment. However, choices for self-actualisation are not only limited by work but by access to sufficient resources or by class, age, gender, disability or ethnicity. In a work-oriented society where people are living longer and the age profile of the population is steadily increasing such criteria have powerful implications for how the self may be represented in older adulthood.

Bauman (2005) argues that the effect of the perceived choice which is now available is to appeal to individuality; that the social world exerts pressure upon the self to express itself as an individual. The irony is that the word 'individual' shares the same etymological root as 'indivisible' and so pertains strongly to a sense of community. For Elliott (2014) it appears that people separate themselves from each other by their choice of lifestyle thus arriving at a 'private' or 'personal' expression of self unaware of the pressures of advertising and the media that may shape their choice. The 'privatised' self is an expression of desires and dreams. Paradoxically, in appealing to the sense of expressing oneself via individual lifestyle advertisers invite individuals to end up being the same (Bauman, 2005). Unwittingly 'identity' becomes 'identical' curiously harking back to the shared root of the two words. In consequence the quest for individual self-expression is perpetuated as the very self becomes likened to a commodity and identity is forever unfixed and uncertain (Burkitt, 2008). Bauman (2005) uses the analogy of a cyclist who must keep pedalling in order to avoid falling off the bike. Stevens, (1996) comments on the way that self becomes an important source of meaning in cultures that are characterised by uncertainty and change thus confirming the urge for constant recreation of the self.

Baumeister (1991; 1987, see Figure 1, P.25) highlights the importance of self-actualisation and the growing cult of celebrity. He indicates four essential needs that individuals seek to satisfy in finding a meaning to express the self, otherwise termed the process of self-actualisation. They are firstly the need to find a purpose either that is intrinsically satisfying in that it provides pleasure or extrinsically satisfying in that it provides a sense of achievement. Secondly the activity should be valued; that it should be justifiable or promote a sense of legitimacy. Thirdly that it should engender a sense of efficacy; that the individual should feel competent about performing the activity and fourthly the person should feel confident about what s/he does. Personal choice dictates what the activity might be but options are limited by resources and personal circumstances. Moments of personal transition such as retirement and bereavement tend to intensify the focus on how one defines self.

Those who are unable to subscribe to this cyclic consumerist activity may be considered to lack freedom for expression of identity but may have recourse to being able to accept traditional, inherited forms of identity which may, in turn, provide them with greater emotional security and certainty (Baumeister, 1991). Sen, (2007) referring to the multiple contexts within which people move in modern life argues that the manifestations of identity in modern life can still be many and various irrespective of the desires evoked by the advertisers. The examples which he uses from his own life reveal that the multiple facets which he considers to make up the various parts of his identity are linked either to circumstances of birth or, more abundantly, to his values, beliefs and interests. For Sen, identity is not the transient, transitory entity which is constantly in transition and subject to the ever-changing whims of the market. Taylor (1990 in Elliott P9) interprets this alternative position when he says 'We are selves only in that certain issues matter for us. What I am, as a self, my identity, is essentially defined in the way things have significance for me'. His words are in agreement with Baumeister's criteria for finding a suitable meaning to life.

2.5. In summary

Discussing the progression of philosophical understanding of the self against the cultural backdrop and developments which occurred during specific historical periods has made visible how these factors have helped to shape conceptions of the self. The process has also

served as a springboard to highlighting the sequence of evolution in how the self has been conceptualised.

Since Descartes, conceptions of the self have progressed from the purely existential and biological to cognitive and experiential while incrementally acknowledging the effect of others and of society in general to shape the sense of self. Psychodynamic understanding emerges towards the end of the nineteenth century with the work of Freud and admits the emotional significance of self but views consciousness as partial – almost the antithesis of the Cartesian view. The basis of Freud's work now forms an integral part of modern day counselling and therapy. While there may be benefits to knowledge of studying people from a single perspective it remains that the individual usually acts and is perceived as a unitary being (Jenkins, 2014). The view reflects Stevens' fifth criterion for personhood which contends that all the first four criteria for personhood interact to form the self. This study deals with lived experience and so such a view of self holds especial significance.

This sequential but holistic approach to discussion was chosen in preference to adopting one which followed the many perspectives through which scholars opt to study the self for several reasons. First, such an approach allows developments in thinking to become clear. Second it allows thought to be more easily situated in the beliefs and values of the period. Third because, regardless of current mores, all of these approaches to understanding the self remain extant. Fourth, as a result of this exposition the backdrop has been created for adopting a socially constructed perspective on self. Social constructionists (Gergen, 1985; Harré, 1983; Shotter, 1993) argue that the boundaries between person and social context are merged. The social world, social history, current social practices, social structure and social divisions, the patterning of everyday conversations and social interactions all lie at the heart of investigative research. As social constructs are not fixed but rely upon interaction and iterations of meanings which embody values and beliefs no philosophical perspectives are eliminated from the study. The age range of the participants in this study spans forty years and interpretation of the data needs to take into consideration how historicity has shaped their lived experience. To summarise in Harré's words: 'Our personal attributes, including our memories, taken together make up a unique cluster of stories different from the clusters of anyone else' (1998: 19).

Such alternative bases for the expression of identity have particular application to the way that health and fitness are perceived, linked to the familiarity and security of experiences earlier in the life course or to consumerist lifestyle choices. The biological perspective of the self which was originally obvious, though in Descartes' view, inferior, can still be considered separately in terms of clinical investigation and advancement, but bodies now are intertwined with social circumstances (Toates, 1996). Health and fitness nowadays can be interpreted as commodities to be promoted as features of lifestyle or as items of economic necessity (Start Active, Stay Active, 2011). Their quality is an integral part of the continued existence of the self regardless of how they might be used to express identity.

The next chapter will explore notions of self, body, the expression of identity and ageing in relation to current discourses and lifestyle issues.

Chapter Three: Age & Ageing

Introduction

The last chapter established a historical overview of perspectives of the self and its relationship to the body. This chapter discusses age and ageing in the light of those perspectives and with particular relevance to the life course of the participants in the study. For the purposes of clarity 'age' is seen as a substantive term referring to a moment in time: 'ageing' is seen as a continuous process. Yet the distinction is sometimes blurred because, in terms, of chronology, age is mutable.

There are three parts to this chapter. The first addresses common discourses on age and ageing; the second concerns how ageing has been, and continues to be, theorised; the third deals with ageing in society and its impact upon social policy. The last section pays particular attention to health messages and how they are handled in relation to encouraging older people to engage in exercise.

Part 1 Common discourses on ageing

3.1.1. Age as chronology

Laz, (1998, P.85) remarks that it seems almost absurd to think about age as anything but a chronological fact but that it is something every individual simply *is*. 'Like race and gender, for most people most of the time, age is unproblematic'. Age would seem to be the most straightforward term to explore for, at least superficially it is a quantitative term representing the length of time spent alive. It is a feature of personhood which situates the individual along the life course and in so doing implies both continuity and change (Giddens, 1991). Linguistically, in English, age is expressed in an ontological manner, as part of the existence of the self. However in other European languages age is considered to be a possession, e.g. *j'ai 21 ans* (I am 21 years old); *tengo muchos años* (I am very old); *ich habe 40 jahre* (I am 40 years old). In this respect the concept harks back to the pragmatist, James' (1961; 1892) formulation of the self to include the individual's property. The notion of owning age implies a certain consistency in the body like having a big head or long legs. Conversely it is a possession which is constantly and inevitably changing with the passage of time and, just as a child's body changes becomes part of 'being'.

3.1. 2. Age and the Self

Unlike expressions or projections of the self, the two processes, body changes and chronological ageing were, until the advent of techniques of cosmetic surgery, immune from human agency. Hockey & James (2003) argue that ageing and identity are both social processes. So it is the interactive relationship with society which shapes the way that ageing is experienced. Giddens (1991) emphasises the role of reflexivity as individual agency interacts with the structures of society leading to the self being perceived as mutable yet consistent. The essential self remains the same but the way it is perceived by others and the way it is expressed may change in relation to context which can have an effect upon how ageing is experienced (Townsend et al., 2006; Hurd Clarke et al., 2008; 2009).

3.1.3. Age and the life course

The notion of the life course provides an extremely useful way of conceptualising and representing the process of age-related change. It provides a context against which individuals can interpret the contours of everyday life (Gubrium, Holstein and Buckholdt, 1994). In practical terms the perspective allows people to situate themselves in relation to others and, via the process of reflexivity, to convey their own perceptions of how they, and others, are ageing (Oberg and Tornstam, 2001). Setting personal experience against a broader context makes life more predictable and easier to understand. For example age-based rituals provide markers and indicate changes in status or position in society. In contrast to previous generations numerical age has become vested with great bureaucratic and symbolic power, permitting or denying access to different kinds of social arenas e.g. education, admission to pubs and places of recreation (Gilleard and Higgs, 2000).

In qualitative studies researchers are aware of, and treat with caution, the homogenising effect that such markers can have when attempting to construct a framework against which to view lived experience. In early studies linked to the processes of child development, age and ageing are often taken for granted as biologically grounded givens (Hockey and James, 2003) but a blurring of the boundaries between mid-life and old age (Featherstone & Hepworth, 1991) is consistent with a view of ageing from a life course perspective (Hockey & James, 2003) where ageing is seen to be a fluid and dynamic process which flows rather than as a wheel which turns through set stages.

Dannefer (2011:4) points out that 'age' can almost be used as a scapegoat when individual differences appear to defy explanation and that 'many kinds of individual change "inevitably happen"... and are therefore "explained" by age'. In support of this Baars (2012: 53 cited in Phillipson, 2013: 66) warns against adopting the over simplistic view that synchronises chronometric ageing to biological ageing and is often used as a basis for determining social policy:

Chronometric age is just a measurement of the time that has elapsed since someone was born. We are getting older with every tick of the clock, but this 'older' only has precise meaning in a chronometric not a gerontological sense. The 'aged' are extremely heterogeneous and have no more in common than a certain minimum calendar age. Dividing adults in age categories may seem practical but does not advance our understanding of ageing (Baars 2012: 53 cited in Phillipson, 2013: 66).

The dangers that he warns against are epitomised in the debate surrounding the metaphor of the Third and Fourth Age.

3.1.4. The Third and Fourth Ages

The terms Third and Fourth Age (Laslett, 1991) provide useful mechanisms for organising and discussing longitudinal data (Barnes, 2011) in respect of life beyond retirement. The Third Age refers to a period of active social engagement and relatively good health (Smith, 2000) following withdrawal from the labour market while the Fourth Age is used to define a later period characterised by physiological and functional decline accompanied by restricted engagement in society. Some studies set the age of 80, others 85, as the dividing line between the two stages. However longitudinal studies show that there are important individual differences in both the timing and the pattern of decline (Mahncke et al. 2006). Hence Barnes (2011) describes the terms as phenotype expressions that are dynamic and subject to variation and evolution. Baltes (1997) remarks that very old age i.e. the concept of the Fourth Age, is young for it is a relatively recent evolutionary event. In the past few people have lived long enough for the notion to have been conceptualised. Kafková (2016) warns against conflating the Fourth Age with the Oldest Old; the concurrent danger of homogenising populations of older adults beyond the current average age of life expectancy, whilst ignoring the significance of cultural and economic capital on health and quality of life. Gilleard and Higgs (2010) refer to the historical association of the Fourth Age with infirmity and long-term social care as a 'social imaginary' (2010: 121) which is to be

feared and is undesirable but by no means inevitable. In short debate has arisen from how the Fourth Age is interpreted and its consequent ability to have powerful implications for the organisation of society especially in relation to demographic change.

Two viewpoints predominate about the quality of life that will accompany these additional years. The more optimistic argues that the extra years designated by the Fourth Age could be characterised by positive life quality due to processes associated with the plasticity of ageing. The processes of senescence might also be slowed or delayed in the interactive context of environments that are supportive of longevity (Finch, 1998; Rowe and Kahn, 1987). Fries (1980) remarked upon the increasing 'rectangularisation' of the life course in that the period of decline, where it existed, was becoming shorter and more rapid. Baltes and Baltes (1993) argued that this was because most third-agers in many industrialized countries could compensate weaknesses caused by biological ageing through cultural and social resources.

The more negative viewpoint suggests that the extra years will be characterized by frailty, impairment, multimorbidity, loss of autonomy and personal identity. Rather than being related to a delay of biological decline they become 'manufactured survival' (Olshansky, Carnes and Grahn, 1998). Such polarities of viewpoint appear to assume that the Fourth Age and chronology are linked and that everyone who lives long enough will experience the Fourth Age. This normative approach also underlies medical screening programmes which have the effect of objectifying and homogenising people.

Yet healthy behaviour during the sixth decade of life is a powerful predictor of ageing well in the ninth decade (Hartman-Stein and Potkanowicz, 2003). Furthermore engagement in physical activity has been shown to have beneficial effects in maintaining functionality and resisting the effects of ageing on multiple levels, physical, emotional and cognitive (Kohl, 2012; Rizzuto et al. 2012). Such evidence supports the suggestion that the processes of age resistance might be a natural progression resulting from living longer Oberg & Transtom (2001). It also supports the wisdom of promoting healthy lifestyles in order to offset age-related physiological decline.

Whereas biology has a strong influence on regulating the passage from birth to death, at the beginning of the twenty first century the physicality of the body's life course is becoming a

less and less firm indicator of age-based ability (Hockey and James, 2003). Ageing no longer has the same inevitability expressed in traditional discourses of decline, but is affected by personal choice as demonstrated by women in their 50s, who choose to adopt a self image which is congruent with their body image (Ballard et al., 2005; Clarke and Warren, 2007) and attendant life circumstances such as wealth and ethnicity. Furthermore a decade has already passed since Tulle (2008a) remarked that research into the causes of functional deterioration (Hunter et al., 2004) and the underlying causes of frailty (Fair, 2006) suggested that the metaphor of decline was no longer a sufficient means for making sense of ageing. Such studies questioned whether disease was a normal part of ageing or whether it should be viewed as a separate event. They indicate that social forces also have a significant part to play in understanding the processes of ageing at the beginning of the twenty-first century.

In terms of social discourse those who are yet to experience membership of Third and Fourth Age cohorts may not see the distinction between these two ages and their views may be grounded in the traditional assumptions and stereotypical beliefs about older people (Dionigi, 2015). In adopting this position they may have cause to fear the 'social imaginary' that Gilleard and Higgs (2010) suggest. Horton et al. (2007) argue that established stereotypes of older people in North America are primarily negative and in England 'The Senior Citizen Times' posts as number one in its list of common myths of older people the view that most older people live in institutions. The perceptions that older adults hold of themselves and of their peers are complex, multidimensional and dynamic (Kornadt and Rothermund, 2011). Dionigi (2015) remarks upon the ambivalence with which negative perceptions of ageing may be employed towards peers but not towards the individual self, thus allowing the self to remain resilient in the face of ageing (Weiss and Lang, 2012). This also accounts for 'othering' with which older adults also tend to judge one another (Townsend et al. 2006; Jones, 2006; Lund and Engelsrud, 2008; Hurd Clarke and Korotchenko, 2015). In other words all these stereotypes of ageing are social constructs that are culturally and historically situated as well as individually interpreted.

When negative stereotypes are internalised, as in the 'social imaginary' (Gilleard and Higgs, 2010), they have the power to damage self esteem and can be detrimental to health (Hurd Clarke and Korotchenko, 2016). Ageism is particularly injurious to older women (Walker et al. 2007). Sontag (1972) explains that this is because ageing women suffer a double jeopardy

which arises from the dual sources of ageing and gender. Though both men and women progress through similar life stages of youth, adulthood and into old age, the characteristics which society values are gendered. Those valorized for men e.g. skills, freedom and self-sufficiency, tend to develop as men age; however those which are foregrounded for women, beauty and sexual attractiveness, are seen to decline. Furthermore women are perceived to age earlier than men which, according to Sontag (1972), causes them to adopt a more defensive attitude and to reject their real age. Having a positive self image is contiguous with the ability to remain engaged in social networks (Age UK, 2016). This is important because fundamental to the decision to engage in exercise are perceptions of self and ageing (Whaley and Ebbeck, 2002). How the body is understood is also influential in this decision.

3.1.5. Ageing and embodiment

Having a body is the essential prerequisite for existence. The body is the medium via which the self is expressed (Goffman, 1959) and the senses are the routes by which the individual interprets the world (Merleau-Ponty, 1962). Laz (2003) sees embodiment as a stream. In this way the concept of age is an enduring yet ever-changing characteristic in synchrony with the body (Stevens, 1996). Just as one can 'be' and 'have' age one can 'be' and 'have' a body (Howson, 2013). The two may, or may not, change at the same rate but are always linked. Shilling (1993) sees the body as a project which is always unfinished. For Laz (2003) the process of ageing is one of constantly 'becoming'. The individual 'accomplishes' or 'performs' age in an embodied manner. The self is embodied and socially constructed via the process of reflexivity (Giddens, 1991).

Using analysis of interviews with older people Laz (2003) demonstrates how the two themes of age and embodiment can be mutually theorised. From the transcripts she identifies four dimensions in which age is embodied. They are: activity, fitness and health; energy; appearance; and ailments and illness. All four dimensions involve actions of the body and all four are susceptible to change across the life course. Most of the time, apart from bouts of illness, the nature of change is imperceptible but the process of embodiment and the reflexive nature of the self (Mead, 1934; Goffman, 1959; Giddens, 1991) facilitate the link between society and individual identity and so enable individuals to perceive how they are ageing (Hockey and James, 2003; Oberg and Tornstam, 1999).

Craib (1998, P.10) summarises and extends this mosaic of ideas about the importance of having and being a body when he says,

Yet my body is more important than I am; the pulsating organs which I inhabit are a constant part of my feeling and thinking; I have various physical needs which change throughout my life as my body changes. And the real scandal of being embodied, one which arguably is a governing feature of all our lives, is that our embodiment comes to an end (Craib, 1998, p.10).

Here Craib introduces the notion of finitude which, like the colloquial 'elephant in the room' constitutes the unmentionable spectre which defines the concept of ageing by imposing an external marker.

Longitudinal studies have provided examples of how age is embodied. Vaillant and Mukamal (2001) followed the lives of 600 students for 60 years and found that functioning at the age of 70 - 80 years could be predicted by association with seven variables pre-50 years old. These were not smoking or stopping when young; having an adaptive coping style; not abusing alcohol; maintaining healthy weight; having a stable marriage and engaging in exercise. Biomarkers associated with functional age included lean muscle mass; muscle strength; basal metabolic rate; the ratio of body fat to muscle; aerobic capacity; blood sugar tolerance; cholesterol/high-density lipoprotein ration; blood pressure; bone density and internal temperature regulation. The indicators tend to mesh with one another and have become prominent in the quest to identify and promote 'successful ageing' (Rowe & Kahn, 1997). In contrast, there is some plasticity in ageing processes: impairment is not inevitable (Grundy, 2002). Deterioration in muscle strength associated with ageing is reversible (Greig, 2002; Malbut, Dinan and Young, 2002; McMurdo, 2000) but to effect change implies more than corporeal involvement. To be effective it implies willingness and commitment to behaviour modification in the sense of adopting a new self schema (Whaley and Ebbeck, 2002). Many behaviour change strategies rely on taking biomedical measurements to monitor progress. In doing so they revert to a dualist approach privileging mind over body and ignoring the value of engaging the senses (Nettleton, 2015).

3.1.6. Other perceptions of ageing

Mullan, (2002) reveals the complexities which can mar understanding of ageing when he states that it is 'a promiscuous term' (P. 13) which in common parlance is often equated

with the term 'elderly' as opposed to indicating the continuous process mentioned by authors such as Laz (2003) and Shilling (1993). Mullan argues that depending upon the perspective from which the term ageing is being considered it shelters a host of other meanings, many of which stimulate an emotive response (Bytheway, 2005). On the other hand Bytheway (2011) notably signals the extant lacuna of definition relating to age in specific contexts e.g. Age UK avoids all established social markers. Promotional literature focuses on 'later life' and 'older people'; 'celebrates ageing and sets out a positive vision for "our ageing society"' but avoids defining what is meant by 'age' and also tactfully ignores its finite quality.

In contrast to individual ageing, population ageing (Victor, 2010) defined as 8 -10 per cent or more of the population being over the age of 60, has tended to concentrate the minds of political economists on seeing this phenomenon as a problem in terms of the perceived financial consequences for health and social care of supporting a larger proportion of older people (Phillipson et al., 2008; Willetts, 2010). Phillipson (1998) argues that policy and government interests in old age emphasise the similarities of older people rather than their differences. For example, people tend to be viewed in birth cohorts or in terms of their needs for health or social care.

Nevertheless Bowling et al. (2005: 479) justify the use of 65, the former state pension age in UK, as a convenient threshold to denote the beginning of 'old age' for the purpose of research and policy making. However, in agreement with Phillipson (1998) and Baars (2012), they note its unreliability as a normative indicator of physiological capability, functionality or decline upon which to base research or social policy. They argue

Any categorisation of chronological age obscures the physiological, psychological and social diversity of older people. The age group spans up to 40 years of future life, and comprises both the delights of "the third age" and the vulnerability of the oldest old, including those at the limits of their functional capacity (Bowling et al. 2005: 479).

Thus the debate surrounding the existence and nature of the Third and Fourth Ages is perpetuated.

The next section explores the factors which contribute to the formation of the social constructs which are taken for granted and so tend to be overlooked when considering contemporary social conditions in relation to policy-making.

3.1.7. A socially constructed view of ageing

Mullan's view of the multi-faceted approaches to the meanings of age (2002) continue to ring true in this context. Chudacoff (1989) observes that though age had some religious and spiritual significance in mediaeval times it came to assume considerably more importance as a basis for social categorisation over the course of the twentieth century. Until then knowing an individual's age did not give automatic insight into that person's roles or social standing. Over the course of the century legal rights, duties and responsibilities associated with citizenship became linked to age e.g. the right to drive a motor vehicle, military service, voting in elections (Phillipson, 2013). But perhaps the biggest impact on the growth of perceptions of older people was the introduction of a fixed retirement age (though recently no longer extant) and the receipt of a state pension (1908).

[O]lder people no longer "disappeared" into the ranks of the poor but were deemed worthy of specific support and assistance. On the negative side, emphasis on age as a social category became linked with specific attributes associated with chronological age, which were used to justify particular attitudes and practices towards older people (Phillipson, 2013:65).

However recent legislation overturning the fixed retirement age may have the effect of further diversifying conditions for older adults without changing common discourses which refer to them.

From a life course perspective birthdays can have a similar stereotypical effect, particularly those which end in zero and are often perceived as milestones (Bytheway, 2005). They can be celebrated expansively, bemoaned or even denied. In this sense ageing is no longer a process which flows (Hockey & James, 2003) but is socially constructed in stages (Gergen and Gergen, 2003).

The personal choice demonstrated in recognising birthdays is reflected in the different attitudes that individuals have towards their own age and towards that of others. Common discourses tend to attach the term 'ageing' to the later stages of life (Mullan, 2002) but other interpretations occur within specific contexts. For example young athletes often fear

that they will be 'over the hill' in their 30s (Grant and Kluge, 2007) or find it difficult to imagine what later life will be like (Phoenix and Sparkes, 2006). The interpretation is also mitigated by the age and perspective of the speaker. Those in their 60s often regard themselves as still young (Hurd, 1999; McCarthy and Stone, 2015). Even people who would normally be categorised as 'old' in relation to their chronological age often speak of themselves as though they are not old (Bultena & Powers, 1978; Jones, 2006). More generally the meaning of both age and ageing is closely related to the chronological age of the speaker at the time. Campbell, vice –president of AGE Platform Europe (2015) stated in conference that the response she usually received to the question 'What is old?' was about ten years older than the interviewee. Dovey (2015) summarised in 'The New Yorker'

Old age is perplexing to imagine in part because the definition of it is notoriously unstable. As people age they tend to move the goalposts that mark out major life stages'.

The position of received stereotypes of what constitutes 'old' i.e. disengagement, illness, decline (Resnick, 1997; Troen, 2003; Bowling et al., 2005; Kirkwood, 2001; Townsend et al., 2006) provides a key to understanding how these views are shaped. Many older people make the distinction between 'feeling' old and 'being' old and recognise that there is a fragile line between 'old' and 'not old' (Townsend et al. 2006; Thompson, 1992; Minichiello et al., 2000; Cremmin, 1992; Healey & Ross, 2002; Bowling et al., 2005; Hurd Clarke and Korotchenko, 2014).

A survey on subjective age-identity carried out amongst the British public by Age Concern (1992) showed that the older the respondent the later the age at which s/he states old age begins. There are also cultural differences. In a survey of 54,988 people aged 15+ conducted in 28 countries across Europe respondents were asked to judge when they thought the limit of youth ended and when old age started. The results were arranged according to findings in each of the participant countries. Turkey set the limits at the lowest levels: 34 years for the end of youth and 55 for the beginning of old age; closely followed by UK at 35 and 59. At the other end of the spectrum lay Greece where people felt youth ended at 52 years and old age began at 68. The responses suggest that cultural factors may shape perceptions but also confirm the perennial existence of the subjective perspective from which individuals view the concept of ageing.

Similar work done in North America (Sherman & Schiffman, 1991; Barak & Schiffman, 1981) observes that age concepts are based on personal age indicators which have a comparative function. Many older people reported themselves to be 10 -15 years younger than their chronological age. When comparing themselves to other people individuals perceived themselves to be healthier, more financially secure and more satisfied with their lives. Jankowski et al., (2014) argue that it may be that with age people become resilient in the face of social pressure or, alternatively, that they may be demonstrating a 'third person effect', whereby they see themselves as being less affected by media and sociocultural pressures than others (Davison, 1981). However, those experiencing poorer health tend to feel older than their chronological age (Barrett, 2003; Hubley and Russell, 2009; Hurd Clarke and Korotchenko. 2014).

Townsend et al. (2006) cite the value placed on youthfulness in western societies and the emphasis placed upon 'productive ageing' (Ekerdt and Koss, 2015). According to Hurd Clarke and Griffin (2008) there is a social obsession with youthfulness and discrimination against older adults. The practice devalues old age by driving older people towards adopting expressions of 'youthful' stereotypes. Performing their age in a way which acknowledges the stereotypes is disempowering because it causes them to limit personal agency (Tulle, 2008b). Such pressures are recognised in Featherstone & Hepworth's (1991) formulation of the mask of ageing and subsequent theories of masquerade (Katz, 2002; Biggs, 2004; Ballard, 2005) which will be discussed in the next section.

Part 2. Theories of ageing

3.2.1. The emergence of theory

Birren is reported (Bengtson & Schaie, 1999) as saying in 'Emergent Theories of Aging' (1988) that the study of ageing was data-rich but theory-poor and that theories emergent at that time tended to be related to physiological changes in the body over the life course or to changes imposed by socio-political structures such as retirement or pension age. Crawford (1971) in UK and Estes (1979a) in USA note the tendency to treat ageing at this period largely in terms of social welfare, addressing perceived needs as they arose. They argue that ageing is merely described in terms of the activities and lifestyle of older people rather than considered in the context of causal linkages between social, economic and political

structure. Bengtson and Schaie (1999) regret the absence of more formalised theory for its ability to explain and understand ageing as opposed to research strategies that lead to generalizations and the production of a model based upon empirical observations. They argue that theory is an essential precursor to any intervention to ensure the success of that intervention.

Their view is epitomised in one of the earliest 'theories' of ageing viz. disengagement theory. Cumming and Henry (1961) postulate the mutual withdrawal of society from the individual and the individual from society that leads to functional harmony between the expressions and wishes of older people and those of society. However at this particular time retirement age from the labour force was fixed and obligatory so the individual had little choice of action (Jamieson, 2002).

In activity theory Havighurst (1963) claimed that older people need to continue to be active in the same way that they were in middle age. However the theory pays no regard to the fact that the purposes of activities in middle age e.g. family responsibilities have changed or no longer exist in retirement. Paradoxically too those responsibilities were probably discharged under intense time pressure which has since been removed or alleviated through cessation of paid employment. The retiree now has time at his/her disposal but may see nothing as being worth doing. At least that may be the situation in the first weeks or months after retirement but generally changes as people habituate (Ekerdt and Koss, 2016) and find things to do with their newfound time. Both disengagement theory and activity theory appear to generalise about all older people and do not take into consideration those who have never been in paid employment for whatever reason. Their virtue is in setting the person in the context of society rather than seeing the individual merely as a prospective recipient of health care.

A slightly different conceptualisation of activity theory is continuity theory (Atchley, 1993) which admits a life course perspective. The author suggests that aspects of people's past give meanings to later life and influence the choices they make in adopting activities. Recognition of this dimension acknowledges a certain amount of diversity within the retired population.

3.2.2. Evolution

Tracing the evolution of theories of ageing across the last three decades at the launch of the third edition of his 'Handbook of Theories of Aging' (2016) Bengtson felt that the situation with regard to theory production was improving and that more theory was being posited. He ascribed the dearth of theory towards the end of the twentieth century to the huge supply of 'Big Data' which was readily available for secondary analysis. Unfortunately this practice generally led to descriptive publications rather than theory which sought to explain findings. Furthermore there are limitations for the application of findings from research conducted from a single academic perspective. The practice perpetuates a fragmented view of older adults. Recognition of this factor has led to recommendations that gerontological research should become more interdisciplinary in nature (Bengtson, 2016).

A group of theories which emerged towards the end of 1980s and which appeared in the earliest edition of the handbook (1999) likened the effects of ageing to that of wearing a mask. Fairhurst (1998), basing her work on interview material with older women, notes that three themes are subsumed in these theories. They are the inevitability of ageing; fear of ageing and, the most salient, a separation of the self and the body.

3.2.3. Masking theories of Ageing

The concept of the Mask of Ageing becomes a convenient focus for discussing the outward appearance of ageing; social attitudes towards the phenomenon and, most importantly for this thesis, how individuals perceive their own ageing. The concept also serves to mark the relationship between the individual and society; how individuals are constrained by or resist the pressures that society exerts. Its genesis arises from attempts to explain conditions in society and the rise of consumerism at the end of the 1980s.

The model perpetuates a Cartesian view of self capable of separating an ageing body from the constancy of the person who inhabits it (Featherstone and Hepworth, 1991). The dichotomy in thinking suggests that the individual 'has' a body but 'is' a person but who 'thinks' s/he is the same person regardless of the passage of time, events experienced over the life course and changes wrought upon or in the body. The signs of ageing are external, expressed on the surface of the body but have no impact upon the mind where the essential self resides. Thus separation of self and body is seen to occur as Fairhurst suggests (1998).

However the body is inescapable (Tulle, 2015). Embodiment is central to being a person (Stevens (1996). The body is the vehicle for the exercise of skills, for communicating and relating to others. 'The way it functions (or fails to function) can change the basic ground of our experience' (Stephens,1996:17).The view chimes with 'being' an age and 'having' years, just as an individual 'is' a body and 'has' a body rather than merely 'inhabits' it temporarily, in the fashion of the Cartesian model.

At an academic level Shilling (1993) and Oberg, (1995) argued that the body was an 'absent presence'. Both note that human agency still tends to be associated with the mind and the dominance of cognition rather than the body in sociological and gerontological theory. Frank (1991) suggests that this is because we tend to take our bodies for granted, unconsciously accepting uncontrollable physiological phenomena e.g. blushing, as natural and commonplace (Howson, 2004). A phenomenological perspective of embodiment stresses the body's capacity for establishing both spatial and temporal unity through actions (Merleau-Ponty, 1962). However certain conditions e.g. pain or illness, can cause phenomenological disruption and lead the person to focus on bodily sensations and experiences so that the body is perceived objectively. The presence of impairment or disability also limits the power of personal agency to express identity in an embodied way (Turner, 2008).

Nevertheless according to Laz (2003) the process of ageing is imperceptible and so the wearer of the mask is unaware that change is taking place. Jullien (2011) takes a unified view of the self in relation to the processes of ageing but refers to the insidious nature of the 'mask' and its creeping approach which may shock an individual who, unawares, catches sight of his/her appearance reflected in the mirror. Jullien (2011) explains that this 'silent transformation' of life suggests the existence of a belief in self beyond the superficial. Simultaneously it highlights the inevitability of ageing.

Frank (1991) explains that since we are very familiar with our bodies then, most of the time, we do not see them objectively but we conceptualise them as an integral part of the self. This implies that we make assumptions about ourselves based on the clues we receive during social interaction as was suggested by the pragmatists (Cooley, 1902). However, none of these views take account of the power of human agency as expressed in Goffman's

(1959) dramaturgical approach to impression management. On the other hand unexpected reflections on the self whether they are received from other people or from a mirror contribute to explaining the emergence of social pressure and the power of the mask to constrain individuals or to cause them to resist its power. A consumerist perspective seeks to exploit the uncertainty provoked by social pressure.

Hence the image of the mask represents the sociocultural pressure experienced by older people as it becomes capable of inciting fear of censure and of what might happen in the future. This helps to explain why some commentators describe the obduracy and immutability of the mask in vivid terms where '...the ageing body becomes a cage from which a younger self-identity cannot escape' (Biggs, 2004:52) or as 'an affliction as if from an acute attack of an external virus, one that masks...the human body' (Bytheway, 2011: 94). Bytheway's view emphasises the enormity of social pressure which has the capacity to disempower people as they age, vilifies the concept of ageing and hardens the image of the mask. Biggs (2004) focuses upon the ability of the mask to erode self esteem leading to the desire to replace its effects by indulging in masquerade in order to resist its incursions and maintain a respectable social identity. However the mask of ageing is but a theory attempting to explain this social behaviour in the context of the rise of consumerism and the cult of youth which began almost simultaneously in the period of reconstruction after the Second World War (Marwick, 1998) and led to the development of markets no longer selling products for practical purposes but promoting aspirational lifestyles. In so doing advertisers sought to evoke an emotional response. Consequently the theory is likely to have had more resonance at the time that it was posited than it may have at the beginning of the twenty-first century. Nevertheless it remains symbolic of extant negative social discourses on ageing.

3.2.4. The power of Social discourse

The power of social discourse becomes integrated into the processes of marketing and leads to gendered, idealized images being internalized. In Western civilization women are expected to be thin but voluptuous (Bordo, 2003): men must strive to be lean, muscular and physically imposing (Lorber and Moore, 2007). As they age women are subjected to double standards of discrimination (Sontag, 1972) because the physical signs of ageing are more accepted among men, particularly those who are wealthy and powerful. Both men and

women experience dissatisfaction as their bodies deteriorate, but women tend to report greater body dissatisfaction and sociocultural appearance pressures in comparison to men (Buote et al. 2011; Rumsey and Harcourt, 2005). Nonetheless, having always felt at a disadvantage, the process of deterioration appears to matter less to women (Tiggemann, 2004). Bennett et al. (2015) explain that women are disappointed and frustrated because they are no longer able to conform to the young, thin ideal, but they also experience a sense of freedom. Both affluent and working class women became less invested in their appearance as they age (Dumas et al., 2005). Women from non-European cultural backgrounds perceive their older bodies with greater satisfaction and have less concern with body weight (Schuler et al., 2008). Men engage in physical activity in an effort to slow down or redress bodily changes that they perceive to be undermining their masculinity (Hurd Clarke and Lefkowich, 2018). For women functionality is privileged over appearance (Liechty and Yarnal, 2010; Jankowski et al. 2014). Some aspects of the body, for example illness and impairment, are less socially constructed than others (Tulle, 2015). Limitations to functionality caused by illness or disability are perceived as a source of personal disruption. They are normalised by making social comparisons with others in order to achieve a sense of biographical flow (Hurd Clarke and Bennett, 2013).

In this respect according to Andrews (1999), the mask operates in relation to social pressures which place value on youthfulness. Since the mask is external and is what other people see so it can be treated as an object. It does not have to be accepted subjectively. In this way ageing is seen from a socially constructed point of view and the practice of 'masquerade' describes a reactive response to these pressures. The exterior signs of ageing can be approached, adjusted, 'corrected' (Gergen and Gergen, 2003). Clothing mediates between the naked body and the world (Twigg, 2009) but the body itself has become a surface for self expression in terms of body art and piercings. A subjective view of self can be publicly displayed and, depending upon the nature of the display, the view can be changed at will. Conversely objectification theory contends that women self-objectify as a result of internalizing an observer's perspective on their physical selves. Tiggemann and Andrew (2011) found that scenarios involving revealing clothing led to a greater state of objectification, body shame, body dissatisfaction and negative mood. Older Pakistani women perceived positive consequences of wearing clothes that covered the body as in wearing a

hijab (Jankowski et al. (2014). Gullette (2004) arguing that we are aged by culture, comments that the power of the discourse of decline is affecting people at younger and younger ages as image change is open to all.

Women in their 50s tended to want to adopt anti-ageing strategies when they first became aware of changes in their bodies (Ballard et al, 2005) but these new behaviours were short-lived and they preferred to find ways of outwardly expressing their identity in ways which acknowledged the processes of ageing and to 'grow old gracefully' (Fairhurst, 1998). A study of White British and South Asian older men and women aged 56 -92 years (Jankowski et al., 2014) reported the desire to 'age naturally'. People prioritized functional ability over appearance. They recognised pressure from the media for older singers e.g. Tom Jones, to dye their hair. They understood the fear of negative reaction but they saw this as an inappropriate attempt to recover youth. Consequently they commended Tom for allowing his hair to revert to its natural colour. Some reported their frustration and distress about their declining physical ability believing that it equated with loss of independence, wellbeing and identity. In similar vein Canadian women aged between 65 and 94 demonstrate how engagement in physical activity helps them to manage their fear of physical and cognitive decline (Bennett et al. 2017). They were frustrated that their inability to engage in some physical pursuits imposed limits upon their ability to match their perceived cultural ideal for fitness and health but were determined to maintain an active self image. Behaviour of both of these groups is shaped by the value that western society places on maintaining a youthful aspect but they were moved by feelings of pride in their life experience to wish to 'own' their age. Tulle (2008b) remarks that the Third Age is a time for individuals to reclaim their identity. Goffman, (1959) refers to this desire to present a unified persona as an expression of reflexivity which is evidenced by the blending of the public and private selves in a manner fitting to produce a performance or persona that is simultaneously acceptable to the individual and to society. Fears of being marginalised or treated as decrepit or less intellectually capable by others accompany such age appearance management (Jankowski et al. 2014).

Specific to the older adult is the desire to age in a way that they find pleasing but this must also be balanced against the risk of defying social norms and pressures to look age-appropriate while simultaneously maintaining a youthful appearance. For example religion

discourages South Asian women living in England from dyeing their hair (Jankowski et al. 2014). Similarly, Muslim women living in U.S.A. are also less compelled to achieve the western ideal of beauty than their North American counterparts (Jankowski et al. 2014). There are also gender differences in the way that a suitable appearance is achieved. Calasanti and King, (2005) argue that men do not seem to be as concerned as women with the way that their bodies change, becoming soft and shapeless. For Shilling, (1993) the body is a continuous project always in a state of 'becoming'. The notion is supported by Laz's argument that you can 'act your age' (1998) by choosing how to 'perform' it (Laz, 1998, 2003).

The power of consumerism accompanied by enhanced sensitivities towards maintaining a healthy lifestyle is substantial in a society where, for many people nowadays, religious beliefs and traditions are no longer dominant (Stevens & Wetherell, 1996). Tulle (2015) notes how the responsibility for health has shifted from the community to the individual in the period of late modernity which Beck (1991) refers to as the 'risk society'. Society faces a category of risk which has arisen from human progress thus driving social change in order to cope with such risks. Technologies which have produced labour-saving ways of working and the elimination of manual labour have also produced a more sedentary lifestyle comprising more leisure time and the freedom to decide how to use that leisure time. Beck and Beck-Gernsheim (2002) argue that this leads to a climate of individualisation in which individuals are forced to be constantly weighing up their options towards coping with risk in the light of the changing nature of disease associated with longevity and the refashioning of the boundary between individual and state responsibility for health. When extended life expectancy is viewed through the lens of age-associated diseases that have been linked to sedentary lifestyle individuals are expected to take responsibility for their own health. Higgs et al., (2009) argue that they are required to demonstrate the 'will to health' by becoming active consumers of health care (Hurd Clarke and Bennett, 2012) in order to 'age successfully' (Rowe and Kahn, 1997).

Theory arises from attempts to make sense of behaviour and social conditions at the time and so is grounded in those factors (Bengtson & Schaie, 1999). Mannheim (1952) points to the significance of generational consciousness or 'entelechy' which arises from cohorts of people sharing a common experience of social conditions and events. Thus the experience

can influence their attitudes, the way that they think and behave. Baumeister (1991) argues that because society is no longer able to offer a firm value base, value is now sought in the personal sphere e.g. achievement at work, relationships or the development of self (see figure 1, P. 25). He argues that identity is shaped by three elements: those which are imposed e.g. gender, race; those which are acquired e.g. financial status, celebrity and those which are chosen e.g. pastimes, purchases. It is a holistic view of self where the three elements interact and the role of personal agency in the social construction of self is clearly demonstrated. It is important at the end of the twentieth century that at least one of these elements leads to self actualisation or self fulfilment (Baumeister, 1987). His view is reminiscent of that of Stevens (1996) who signals that, for personal stability, individuals need to have identified clear meanings of selfhood in uncertain times. Against a prevailing sense of values based upon the cult of youth all of these elements serve to shape the way that age is perceived and expressed. The next section discusses the construct of agelessness which emerges from these conditions and has been identified as a possible line of defence chosen by older adults to gain control over the meanings ascribed to ageing..

3.2. 5. Agelessness and ageism

Various commentators, (Mead, 1934; Laz, 2003; Hockey & James, 2003; Wetherell & Maybin, 1996; Mannheim. 1952) have referred to the ever-changing nature of society which impacts upon the individual provoking a response, regardless of whether the individual is aware of the social pressure. The act of so responding has the effect of driving further change in society (Giddens, 1991). Featherstone & Hepworth (1991) noted a blurring of the former boundaries perceived between mid-life and retirement at a time in UK when many people were taking early retirement, either by choice or by obligation (Phillipson, 2013). A trend to appear 'ageless' seems to have emerged where the practices of mid-life merely continue into what was formerly seen as old age but which is now more suitably referred to as 'young old age' (Gullette, 2004). This is certainly the image exploited by advertisers who attempt to sell their products via magazines aimed at people in the Third Age (Ylanne, 2015). Products are marketed as aspirational, even going as far as suggesting that there is a 'cure' to old age (Calasanti, Sorensen and King, 2012). Nevertheless the cost of such products remains beyond the reach of many people.

However, there is some suspicion that the concept of agelessness produces a stick to beat people with. Hepworth (2004) points out that if the self is ageless it becomes disembodied. Vincent (2006) argues that the many so-called 'scientific fixes' which can be applied to ageing actually devalue old age. Vincent (2003) expresses a very strong ethical sense that ageing is fundamentally about coming to terms with physical and mental decline and the natural order of its stages. He classified the various components of anti-ageing approaches in relation to what they claim they can achieve: symptom alleviation; short-term life extension; long-term life extension; elimination of ageing (2006). He challenges the focus on the Third Age (Laslett, 1989) because it seeks to liberate older people from old age by prolonging youth rather than leading to the liberation of old age by embracing inevitability of decline. In particular he regards medical approaches to anti-ageing to be deviant forms of medicine and is supported in this debate by Stock & Callahan (2004) who argue that quality of life is more important than life extension. Their justification is that for lives to be meaningful they must also come to an end.

Conversely, liberation from the routines of the labour market or from other duties associated with mid-life (Ekerdt and Koss, 2016) are in some measure reminiscent of the freedom from responsibility experienced in youth but is sensed more keenly from the perspective of the life course. In this respect the Third Age describes a period of life that is likely to be different from any previous experience and so warrants its own label. Consistent with this view is that rather than liberating people from old age, the Third Age liberates people from former life course duties (Ekerdt and Koss, 2016) and the opportunity to create a new identity. It is reminiscent of the freedom from responsibility experienced in youth but sensed more keenly from the perspective of life course experience.

Nevertheless if social pressure causes old age to be feared or devalued in this way it is little wonder that people seek to avoid it, if only in their imagination (Bornat & Jones, 2014). People seek to protect themselves by dissociating themselves from the discourses of decline (Weiss and Lang, 2012). Andrews, (1999) supports the view that in itself the notion of aspiring to agelessness is a form of ageism. The phenomenon is ageist because it overtly demonstrates the power of the cult of youth in society (Andrews, 1999) and fails to celebrate the benefits of wisdom and experience which accrue with age (Bytheway, 1995).

Yet old age is the only life stage that people seek to avoid and even eradicate (Andrews, 1999).

The danger in adopting an ageless perspective is that people are denied the opportunity to adapt or to develop an ageing self (Tulle and Krekula, 2013). There is no time to 'grow old gracefully' (Fairhurst, 1998). By comparison the notion of a Third Age may provide the security of a ready-made, though mutable, identity which is open to individual interpretation, thus avoiding the characterlessness of agelessness. Many older people play key roles, as volunteers in many voluntary associations and groups (Walker, 2002) yet, at the moment the effect is dulled by the youth orientation of popular culture and the stereotypes of older people as non-productive and old-fashioned (McEwan, 1993; Bytheway, 1995). For Blaikie (1999: 216) 'When agelessness becomes the elixir, the meaning of life evaporates'.

Of all the prejudices based upon stereotypes ageism is the most socially accepted worldwide (Nelson, 2004). Developments in global social policy which will be discussed in the last third of the chapter might be seen to capitalise on this situation for economic reasons e.g. manipulation of the labour market aims to create jobs for younger people by retiring older people early. But this strategy only operates on the basis of numbers, not the availability and suitability of skills or experience. The removal of the default statutory retirement age pays attention to the imbalance in population age cohorts and the need to include people from across the age spectrum in the labour market. Walker, (2002) advocates strategies integrated into society which take account of all people of all ages because everyone is ageing all the time.

In an alternative view on agelessness, Oberg and Transtom (2001) remark on the desirability of projecting a young slender body image as a symbol of one's identity at any age and that the participants in their study on identity ideals who are able to project such a body image report a lower subjective age than their chronological age. Tulle (2008b) agrees that maintaining body competence is a way of expressing identity. Oberg and Transtom (2001) argue that on the one hand this subjective feeling about age could reflect changes in the life course but on the other could be interpreted as a new, subtler form of ageism as people succumb to social pressure to maintain the symbol of their youth. Besides the ability to

project such an image is dependent upon many variables such as gender, class, disability and, not least, genetic endowment. It is also noteworthy that the cultural norms for older body image from people of other ethnic origin, for example African Americans (Hurd Clarke and Korotchenko, 2011), may not be in tune with research participants from Northern Europe.

3.2.6. Babyboomers

The suggestion that there could be changes in the life course and the phenomenon of entelechy or generational consciousness (Mannheim, 1952) features strongly at the beginning of the twenty first century as people who were born after the Second World War and commonly referred to as 'babyboomers' are entering retirement and so might provide a focus for new theories of ageing. Born into a decade of substantial social and economic change (Marwick, 1998) the babyboomers have lived through an age in which technology has developed and continues to develop at exponential rates. Their experience of the world and of ageing is unprecedented. Their life course is contiguous with the rise of consumerism and its contingent effects upon society. It is yet to be seen whether their agentic behaviour and the reputation that the cohort in general established for being youthful iconoclasts will be perpetuated as they age. Born and raised in a consumer society, they were the first teenagers and it is expected that they will not become old in the way that earlier generations have (Sawchuk, 1995; Szmigin and Carrigan, 2001; Gilleard and Higgs, 2005; Jones et al., 2008). However in early soundings Martin et al. (2009) comment with surprise that despite the socioeconomic, medical and public health advantages they have enjoyed, in terms of health and functioning babyboomers are not doing considerably better than earlier cohorts. The demographic upsurge in numbers of older adults and the association between ageing and decline may explain the preponderance of theoretical writing inspired by the themes of health and wellbeing which is now emerging (Bengtson, 2016) as the work is fundamental to the creation of social policy. However, as Jones et al., (2008) point out the focus should be more upon the experience of their life course; the innovations they have lived through and the impact of these upon their values and beliefs rather than upon their sheer numbers.

Agency and self are central to Gilleard & Higgs (2000) work on the cultures of ageing in which they defend an integrated concept of ageing and the body. They maintain that the

internal state of feeling old as well as the physical features of being old are being resisted as much as the category of old age. The self is viewed holistically and not in the Cartesian sense separating mind and body that masking theories encourage. Rather than masking the effects of ageing or indulging in processes of masquerade engagement in physical activity has been shown to have beneficial effects in maintaining functionality and resisting the effects of ageing on multiple levels, physical, emotional and cognitive (Kohl, 2012; Rizzuto et al. 2012). In a Darwinian sense the question may be posited regarding whether processes of age resistance might be a natural progression resulting from living longer (Oberg & Transtom, 2001). Hence those who have access to sufficient resources also have access to a variety of 'cultures of ageing' within which they may construct their own identity and interpret their own ageing (Gilleard & Higgs 2000).

This section has focused on the power of multifaceted social pressures to influence the way that individuals choose to present themselves. The next section takes a macro view focusing upon the systems of planned support, encouragement and measurement which underlie the processes of ageing at population level.

Westerhof & Tulle (2007:237) argue that the most important frameworks that have provided the underpinning for contemporary meanings of ageing and old age are medicine, social policy and the mass media. Discussion so far has centred on the first and third of these. The next and final part of the chapter turns to a discussion of the policies and trends which underlie and are destined to shape current and future experience of ageing.

Part Three: Ageing Well. What is it?

3.3.1. Theoretical perspectives

The Third Age, (Laslett 1989) conceived as a period for self-expression following withdrawal from paid employment and accompanied by freedom from regular childcare duties, may be at risk (Bass, 2006; Biggs, 2003). Or at least the manifestations of its current existence are threatened by shifts in government responsibility for providing economic security in later life and changes in corporate policies placing the onus for pension support on the individual in the form of defined contributions. The financial capacity to save for retirement has also been compromised by changes such as the withdrawal of government grants to support higher education and restructuring of social and childcare benefits putting pressure on

working age adults. Changes in retirement law have attempted to address the situation but the ageing of the workforce in combination with global changes in the nature of work imply the need for new approaches to later life (Walker, 2002). The outcome of the referendum on membership of the European Union has added a new level of uncertainty which has yet to be plumbed. This section will explore the development of a neoliberal approach to welfare, its implications for ageing and discuss possible future strategies.

In recognition of increased longevity, the necessity of overturning negative messages about ageing and plans for the future WHO (2012) summarised the future of policy on ageing by commenting that years had been added to life so now the focus should be to attempt to add life to years. One of the ways to do this would be to improve 'health span' within life span (Barron, 2016) and to limit the incidence of ill health or disability to the final stages of life. Exercise has been acknowledged as an important contributor to maintaining health and functionality. Sports science has positioned itself in the anti-ageing debate from a positivist perspective. By basing the nature of truth on evidence gathered from randomized controlled tests the work adopts a dualist approach to mind and body (Tulle, 2008a). Studies of Masters athletes demonstrate the potential for ageing bodies to continue to express identity through levels of physical performance that command respect. However most people do not have the time or inclination to submit themselves to the rigorous training demanded to achieve such standards of body competence. Furthermore this type of body control is not motivated by health but more by the sense of satisfaction involved (Tulle, 2008a).

Data from longitudinal studies e.g. Hartman-Stein and Potkanowicz, (2003); Vaillant and Mukamal (2001) give a more rounded view and have been useful in identifying the traits and activities that appear to promote health in old age. The work has given rise to a number of descriptive terms which form the basis for health preserving strategies all illustrating slight differences in approach e.g. successful ageing (Rowe & Kahn, 1997); positive ageing (Gergen & Gergen, 2003); resourceful ageing (Reynolds, 2015); healthy ageing (WHO, 2015). A common factor of most of these studies is that ageing is not restricted to the body and physiological matters but involves actions of the self and interaction with society. Indeed Rowe & Kahn (1997) focused their research on individuals who were not suffering pathologic states in an effort to distinguish between 'successful ageing' and 'usual ageing' in

relation to biomedical norms for chronological age. In doing so they defined three interlocking components which contributed to the lives of those who were ageing successfully. These were 'low probability of disease and disease-related disability, high cognitive and physical function capacity, and active engagement with life' (P.433).

Gergen and Gergen (2003) argue that irrespective of external appearances there are three prominent life themes which enable people to age positively. They involve the self, interpersonal relationships and contributions to the community. This definition appears to place more emphasis on agency and the social construction of self rather than on biology. In this respect it chimes more with the long-standing but outmoded activity theory of ageing (Havighurst, 1963), which posited that wellness after retirement could best be guaranteed by remaining active. However Havighurst's theory has been criticised on the grounds that activity should be meaningful or purposeful. Furthermore the theory does not take account of people who through disability or illness are unable to remain what might be perceived as conventionally active.

Other definitions place the emphasis elsewhere e.g. 'resourceful ageing' (Reynolds, 2015) where the author argues that an individual's ability to age well is circumscribed by amounts of social and economic capital accumulated over the life course but deficiencies can be offset by 'creative ageing' projects.

3.3.2. Older people's views

A relatively small amount of research has been done to explore how older people themselves describe what constitutes healthy ageing (Hung et al. 2010) and it is noticeable that there are discrepancies between definitions used in the past by academics and those used by lay people. Academics tended to focus on physical or mental health and social functioning, whereas older people themselves spoke about independence, adaptability, finances and spirituality. There were also cultural differences regarding what mattered most. Barron (2016) found a substantial amount of evidence to support the suggestion that values change with age. An explanation for at least some of the discrepancies is perhaps that academics working on ageing tend to approach their work from a single aspect e.g. biomedicine or health and social care rather than the multidimensional approach

understood when evaluating general quality of life. More recent research tends to take older people's voices more seriously by adopting a qualitative or interpretative paradigm.

3.3.3. A global perspective

From a public health perspective there is no consensus on what constitutes 'healthy ageing' but WHO Report on Ageing and Health (2015) define it as 'the process of developing and maintaining the functional ability that enables well-being in older age' (P.28). The report designates 'functional ability' as being the key component to healthy ageing and argues that it comprises two factors. These are 'intrinsic capacity' i.e. the combined physical and mental capacities of an individual and 'environments' i.e. all the factors in the extrinsic world that form the context of the individual's life.

This definition of health eschews a purely biological approach. It has a much broader base building upon a series of WHO frameworks aimed at improving quality of life globally that preceded the Report on Ageing and Health. All of these address ageing from the perspective of the life course. 'Active Ageing' (2002) reconceptualises the theory of active ageing to include people of all ages. 'Age-friendly Cities' (2007) considers how to make the communities that people live in i.e. the environments referred to in the Report on Ageing and Health, risk-free for those of all ages. The frameworks are intended as dynamic resource banks to promote their stated aims. Building upon these two previous documents, the Report on Ageing and Health (2015) focuses on functionality, overtly concentrating upon bodies remaining operational and viable into old age. In this respect it hints at independence, a factor of crucial importance mentioned by older people themselves when asked to define what it meant to 'age successfully'. Together the frameworks and the report take a holistic view of individuals living agentically within their communities from a life course perspective and were adopted as a Global Strategy and Action Plan on Ageing and Health 2016 -2020 (World Health Assembly, May, 2016). At the meeting in Geneva delegates called for the development of age-friendly environments and alignment of health systems to the needs of older populations.

Also using a life course approach, though not centred upon the person as a whole, but on the biomedical perspective, UK Chief Medical Officers have issued guidance based on biomedical research evidence to enable clinicians, health promotion teams and exercise

providers to stimulate or enhance healthy behaviour (Start Fit, Stay Active, 2011; Everybody Active, Every Day 2014).

3.3.4. Sharing the message of 'Ageing Well'

Though guidance is available the onus to remain fit and healthy is placed firmly on the individual (Tulle, 2015). Images of older people in adverts and promotional literature aimed at encouraging people to take up exercise, physical activity or sport are conspicuous by their absence. Fears of marginalisation and invisibility (Jankowski et al., 2014) are upheld in this respect. For example Nike, makers of a leading brand of sports shoe, have been quoted as not wishing to be represented by images of older people in their publicity campaign for 'The Day the World Runs' 2009 (Piggin, 2017). Yet social identity is increasingly formed around the processes of consumption (Beck, 1991; Bauman, 1998; Zukin and Maguire, 2004). Images of older people used in advertising tend to index specific qualities e.g. reliability (Ylanne, 2015). In other words the images are not intended to represent older people or target them as consumers but are used for alternative, specific purposes.

In terms of featuring health and fitness issues television programmes take their authority from the background of science or medicine e.g. 'Trust me, I'm a doctor' but there appears to be no public media campaign linked to the advice in the CMO guidelines. Soap operas may occasionally address health issues as they reach out to connect with the lived experience of their audience. Conversely healthy messages are offset in other programmes where the emphasis is on indulgence in eating or cookery. The commercial channels rely upon their advertisers for the revenue they bring and so are obliged to pay heed to their own survival when planning publicity campaigns.

In general policy documents and images on websites prefer to focus on images of young people (American College of Sports Medicine, International Council of Sports Science and Physical Education) unless they specifically concern older people (Sport England, 2006). This is generally the case at sports and leisure centres too but, in the absence of any official consumer report, audit or research into how older adults involved in physical activity are represented in the media the evidence is constrained by the data available. Bytheway (1998) remarks that the absence of visual images of older people in promotional material is not unusual. These youthful images are said to be aspirational (Sawchuk, 1995) but it is

difficult to see how images of people in their 30s can be aspirational for those who are already twice that age. Instead ageist attitudes are implied and a strong invocation to indulge in the processes of masquerade to achieve the required condition of agelessness (Andrews, 1999).

A similar strategy appears to be employed in the clothing industry where clothing in magazines aimed at older adults is modelled by individuals who cannot yet be 40 (Fifty Plus catalogue). Both exercise and clothing are capable of enhancing body image but the second involves less effort and has the ability to conceal imperfections instead of attracting attention to them (Hurd Clarke et al., 2009). The successful business of the clothing firms appears to suggest that the public are complicit in the pretence. The reality of life (and probably the 'market' that needs to be targeted) remains invisible. However market research in the clothing industry explains the anomaly.

3.3.5. From point of view of marketing

Sawchuk (1995), drawing on the work of Ostroff (1989) explains this paradox. Firstly older people are sceptical about the claims of advertisers because they may have experienced disappointment in the past. Secondly marketers are divided in their opinion as to the wisdom of using older people in adverts unless they are celebrities because research shows that people do not identify with their actual age cohort but engage in 'down-ageing'. The rationale is that because they identify strongly with youth culture they may not want to be segregated as a market in advertising. Carrigan and Szmigin (1995) argue that cognitive age is approximately 10 -15 years younger than chronological age. The phenomenon is supported by notions of agelessness and the self-protective tendency that people adopt to distance themselves from negative images of ageing (Weiss and Lang, 2012).

In addition, to use older people as models in adverts, risks alienating a younger audience from the product. In other words the approach to age is ambivalent and is shared by both advertisers and consumers (Hurd Clarke and Korotchenko, 2015). Neither advertisers nor older people themselves like the idea of getting older and so if advertisers want to sell their product successfully they must pitch the products not just positively but at a younger looking market. This may explain Nike's attitude to not wishing to use images of older people in their publicity material. Lövgren (2012: 64) explains, 'though it is youth that is

being hailed by marketers, they don't necessarily mean actual young people. Youth is associated with renewal, regeneration and the future'. Besides health messages are usually seen as being associated with preventing people from indulging in pleasurable activities (Jallinoja, 2010) whereas advertisers appeal to a sense of hedonism and aim to satisfy desires.

3.3.6. Health promotion

At the level of advice to individuals attending health consultations time for interaction may be at a premium for complex persuasive strategies to be employed. Health advice tends to invoke the capacity to imagine the future and often a future which can only be achieved by hard work, effort, dedication, adherence and commitment to a programme (Sassatelli, 2014). Such delayed gratification does not suggest the immediacy of impact and ease with which the new product will fit seamlessly into and enhance the lifestyle which comes with the promise of the advertisers and marketers. Instead health advice concentrates on a more serious, moral or dutiful sense of self which may be hard to aspire to if other life conditions are tending towards the negative (Jallinoja, 2010). Both authors point to the delicate balance between a sense of duty or discipline and the prospect of enjoyment when engaging in physical activity.

But of all the factors determining an older person's life situation, health is the most strongly related to subjective-wellbeing (Larson, 1978; Walker, 1999). Tulle (2008a) comments on the power of biomedicine to codify the ageing body. The reasons for doing so translate into economic terms at a national level on the basis of care and the financial outlay that is thereby entailed, especially in the light of current demographic change and the fears that greater numbers of older people will produce greater cost to the health and social care budget (Phillipson, 2013). Improvement of health span would have a significant impact upon this budget. Of course projections are based upon current statistics and situations being extrapolated for the future and so the actual outcome remains uncertain. Goldsmith (2010) makes an impassioned attack on the wisdom of this position.

Catastropharians simply *assume* that babyboomers will follow their parents' and grandparents' life paths, as well as mimic their political values. They assume that longer life-spans will translate into lengthier periods of unproductive and parasitic activity.

Nevertheless public money is allocated on that basis and its effectiveness measured in line with alleviating the perceived future 'burden' of health and social problems on society created by an ageing population. Hence the money is targeted in line with interventions that can demonstrate empirically that they are fit for purpose so may be restricted in the arenas they are able to reach. It is also difficult to compare effectiveness across various activities especially if different criteria are being assessed.

This section has discussed the difficulties of identifying the nature and meanings of wellbeing, ageing well, health or wellness in the sense that it is not the same as an absence of illness. Its position as a social construct makes it elusive to precise definition if the panoply of individual circumstances and cultural differences is to be adequately considered. The next section discusses the problems of measuring the notion.

3.3.7. Measuring 'wellness'

Any grant of public money always brings with it monitoring strategies to check progress and to assess success. In an audit culture driven by quantitative measures (Griffiths, 2011; Sparkes, 2007; Estes et al., 2003) detailed, in depth interpretations of ageing well may be restricted. For example a view taken at the level of public health may reveal percentages of people suffering from chronic conditions which might suggest that they are not ageing well. On the other hand these people could be coping with their conditions and living satisfying lives (Tulle, 2008a). So, not only is it important that much academic endeavour has been directed towards trying to identify what it means to 'age well' but many studies reveal that success entails far more than biology and image (Markula, Grant and Denison, 2001). Baumeister (1991) argues that people retain the ability to pursue goals that confer meaning no matter what their age or their status.

Having established a baseline and loose descriptors for the components which distinguish between those who are ageing normally and those who are ageing well (Rowe & Kahn, 1997), more recent moves have been to assess the profile of 'wellness' nationwide. In particular with the work of Hyde, Wiggins Higgs and Blane (2003) and the creation of the CASP19 scale, developed to measure quality of life. CASP19 is a postal questionnaire which was originally applied to members of the Boyd-Orr study of health and diet aged between 65 -75 years who had been followed up through retrospective interviews during the late

1990s. The process of interviewing and monitoring biomarkers demands specialist attention and is time-consuming. Self report is considered to be more efficient. To this end a simple 19 point questionnaire, CASP19 (see fig. 2), was created (Hyde et al. 2003). It is different from preceding conceptualisations of wellness in that it focuses on the four domains indicated by the acronym: control, autonomy, self-realisation and pleasure. By these means it produces a snapshot of an individual's immediate subjective state of mind and can be administered quickly and easily without expert attention to groups of people simultaneously. The 19 questions relate to the higher echelons of human needs theory (Maslow, 1968). Control is understood as the ability to actively intervene in one's environment (Patrick et al, 1993). Autonomy is defined as the right of an individual to be free from unwanted interference of others (Patrick et al. 1993). Self-realisation and pleasure capture the active and reflexive processes of being human (Giddens, 1990, Turner, 1995). In the CASP19 model the four domains are equal and inseparable rather than hierarchically organised.

Figure 2: Item wording and domains for CASP19

Some materials have been removed from this thesis due to Third Party Copyright. The unabridged version of the thesis can be viewed at the Lanchester Library, Coventry University.

Hyde, Wiggins, Higgs and Blane, (2003)

Following the questionnaire's perceived success as an indicator of quality of life which transcended the purely medical; the 19 questions were reduced to four in 2011 for inclusion in the Annual Population Study (APS) (see fig. 3). The answers, scored on a scale of 0 - 10, are interpreted in terms of life satisfaction; of believing that one's actions are worthwhile, of happiness and of anxiety. It is noteworthy that older people, and especially those in their late 70s and early 80s, have the highest scores on these measures suggesting that regardless of their physical state they are the happiest sector of the population (Wolpert, 2016; Age UK, 2016; Bowling, Farquhar and Browne, 1991; Bowling et al., 1999). Such a statistic supports views expressed in older theories, those referring to continuity and activity; that qualities of persistence and resilience prevail and flourish irrespective of morbidities (Charmaz, 1995; Seeman et al., 1999). On the other hand there is no mention of relationships or continued connection with society, both factors which mitigate against the loneliness and isolation often experienced by older people as they are bereaved or social networks diminish, and which can lead to depression and illness (Bidonde, 2005; Stillman and Baumeister, 2009).

Figure 3: Questions for measuring personal wellbeing from Annual Population Survey 2011 onwards

1. Overall, how satisfied are you with your life nowadays?
 2. Overall, to what extent do you feel the things you do in your life are worthwhile?
 3. Overall, how happy did you feel yesterday?
 4. Overall, how anxious did you feel yesterday?
- Items are score on a scale of 0 – 10 where 0 = low and 10 = high
- www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/bulletins/measuring

In terms of economic policy results of these specific questions do not reflect the cost of treating the morbidities associated with ageing which might be perceived to be increasing in proportion to the rising demographic profile. Furthermore, by separating out the body and mind in a Cartesian dualistic sense the image of the self becomes skewed. Part of this effect

is caused because both CASP19 and the APS questions are scored using a Likert scale and so do not collect detailed information but provide a snapshot of life at a specific time with little reference to changing circumstances. This makes it difficult to compare findings with other surveys exploring aspects of wellbeing, wellness or quality of life. Even the terms defy precise definition. Furthermore, a metaanalysis of academic surveys aimed at producing this sort of more detailed information (Barron, 2016) reveals that though there is some uniformity in the categories used there is a mismatch between the categories the academics used and those chosen by the respondents to describe their own state of wellbeing.

3.3.8. A holistic approach

In trying to promote healthy ageing Walker (2002) questions the wisdom of targeting only one sector of the population, recommending in its place a strategy of 'Active ageing' which would address all sectors of the population since everyone is ageing all the time. This would be a more inclusive approach to ageing across the life course. The development of strategies that sought to link lives might help to obviate ageist attitudes which tend to see older people as different. Walker's work culminated in the WHO framework on Active Ageing (2002).

Combined with a sense of agency (Solomon, 1988) a holistic approach is reflected in the way that the women in their 50s choose to present an integrated ageing identity to the world (Ballard et al, 2005). Yet a holistic view is equally exploited by consumerism where marketers attempt to sell a lifestyle and it is recognised by Gilleard & Higgs (2000) in their notion of cultures of ageing. They see consumer lifestyles as an opportunity to express self and agency. It is a strategy for social inclusion which is not predicated upon the construction of the body as declining. They recognise that each holistic view of the self is founded upon individual choice and experience – or at least appears to be – not forgetting the phenomenon of entelechy or generational style and the way that the reflexive self is embodied and socially constructed. In this study I explore the relationships between perceptions of the processes of ageing and how they mesh with personal experience, identity and self expression, with particular relation to physical activity.

Summary

This chapter has attempted to draw a wide canvas depicting the meanings that are attributed to age and ageing in conjunction with the notions, theories and policies that these shifting concepts evoke. It began with socially constructed popular understandings and discourses of age and ageing; how ageing relates to the self; how it is seen in terms of the life course, biology and embodiment. I have attempted to trace the vacillations in the meanings of self and how at times the body is viewed objectively, at others subjectively and at yet others it is taken for granted as an integral part of self.

The second part discusses how theories of ageing attempt to make sense of how conditions in society intersect with these meanings. Theories attempt to explain how pressures arise from this interaction, how they are perceived and confronted. Part three deals with current and future concerns about ageing and health; how such concerns relate to individuals, populations and on a global scale and how policies shape and are shaped by these concerns.

There are strong reasons for individuals to want to age positively, enjoy quality of life and for governments to want their populations to do likewise. Reports from chief medical officers advocate the inclusion of regular bouts of physical activity to maintain a healthy lifestyle (Everybody Active, Every Day, 2014) but their advice remains generic in nature and surveys suggest that it is not yet having the desired impact. The next chapter traces the development of research aimed at promoting and perpetuating healthy ageing and how this work has produced formal guidelines for exercise. It discusses the philosophical roots of the research and the effectiveness of the advice. By comparing and contrasting evidence on exercise gathered from a phenomenological perspective the chapter investigates alternative approaches to promoting engagement with physical activity.

Chapter Four: Engagements with Exercise

4.1. Introduction

The last two chapters discussed perspectives on personhood, selfhood and the meanings attributed to age and ageing to prepare for a life course perspective through which to interpret lived experience. This perspective permits an appreciation of how the outcomes of later life have been shaped by experience earlier on in life in conjunction with personal and relational ties. The wider canvas available situates lived experience in time and place, acknowledges cultural values, historicity and cohort effects. It thus facilitates greater understanding of how perceptions of ageing and engagement with exercise are socially constructed. This chapter will explore how physical activity or exercise is understood at macro and micro levels and will discuss notions of wellbeing and how these mesh with ideas discussed thus far. Taken together the three chapters, The Self and Personhood, Age and Ageing and Engagements with Exercise, provide a framework within which data from this study can be analysed.

The chapter divides roughly into two sections guided by movement from positivist underpinnings towards more phenomenological approaches to exercise. Finally it seeks to find connections between the two paradigms in the provision of exercise for older adults. It begins with an exploration of the landscape surrounding recommendations for physical activity, the research base to these recommendations and their impact on, and interaction with, social policy. The inability of current policy on exercise promotion to have a major impact on exercise uptake is discussed and attempts to gain insight into what might be missing from exercise promotion by exploring the experience of current exercise 'consumers'.

There is a transition towards the second section which adopts a phenomenological perspective towards engagement with exercise. It investigates the debate concerning how the notion of wellbeing might effectively contribute to consolidating the aims of the competing paradigms towards improved exercise provision for older adults.

Discussion is preceded by a brief definition of exercise according to the way it is conceptualised for the purposes of this study.

4.2. Definitions: What is exercise?

For the purposes of this study exercise is understood as any form of organised physical activity that has a specific set of principles governing movement and which is aimed at producing a health benefit e.g. aerobic training, Pilates or tai chi. Each 'culture of fitness' (Paulson, 2005) brings with it specific beliefs about the purpose, value and likely outcome of the specific movements it entails.

It is noteworthy that, of the three examples of exercise cited, only the first, under the category of keep fit and gymnastics, features in the statistics collected in the Active People Survey (Sport England, 2016), so the efforts of participants in Pilates and tai chi pass unrecorded in terms of levels of national physical activity. This may be because these activities have not been codified as sports and are not represented by national governing bodies. Equally they tend not to represent exercise at degrees of moderate intensity and so do not meet CMO guidelines. As such not only do the efforts pass unnoticed in surveys but they might be perceived to swell the statistics relating to sedentary behaviour. This also calls into question to what extent, if at all, population surveys take into consideration suitability of exercise for individual respondents. On a more positive note the December 2015 report on active engagement in sport made a point of celebrating the vast increase in uptake of keep fit and associated cultures of fitness. However this is only the third consecutive year for which data under the category of keep fit and gym have been collected. In this time percentage uptake has risen from 0.92% to 1.2%. It is possible that the recommendations to increase older adults' participation in sport in a report conducted by Oxford University and commissioned by Sport England (2006) had some influence on the decision to monitor keep fit and gym: 'With regards to desired future opportunities, "inactive" women would prefer things specifically for their age group such as gentle keep fit, dancing (and men to dance with), tai chi and badminton' (P.5 summary).

4.3. Why is exercise important? Background to CMO guidelines on physical activity

Recommended levels for aerobic activity, now adopted by WHO for guidance on aerobic fitness globally, are based upon research at the American College of Sports Medicine (Williams and Wilkins, 1995) conducted in the later part of the twentieth century and driven by the need to address high levels of cardio-vascular disease, the biggest cause of death

worldwide both then and now. The research demonstrated that 30 minutes' exercise performed at moderate intensity five times per week which leads to a moderate rise in the heart rate is beneficial for health. Universal adoption of such a practice is thus likely to reduce the incidence of heart disease in the population. Being specifically targeted at reducing statistics for cardio-vascular disease, the recommendations do not take account of other conditions nor do they take into consideration individuals who may not have the capacity to achieve such levels of activity by reason of disability for example. Furthermore in terms of national statistics many people remain invisible if their chosen exercise does not meet these requirements. For example the Active People Survey 2013 -14 recorded participation in athletics, cycling, football, golf and swimming but no other physical activities.

Recent revised versions of the CMO guidelines (Everybody Active Every Day, 2014) show greater awareness of the need to situate physical activity within the ambit of realistic lived experience in that they suggest that exercise sessions can be segmented into ten minute slots. They also take account of other activities which are capable of raising the heartrate, for example Hoovering, gardening. Furthermore they take account of individual capacity and exposure to risk, for example for disabled people or individuals suffering from chronic health conditions. They adopt a more flexible stance by focusing upon incremental improvement towards moderately intense activity instead of reaching for a goal which an individual might consider unreasonable. They also admit the benefits of strength training exercise and recommend that this type of exercise should be practised twice a week though without further stipulation as to the duration or manner of execution. Nevertheless the underlying factor to all of these recommendations is that they are all inspired by a biomedical approach to the body and are intended to inform and assist local authorities, health and exercise professionals when advising patients and clients. Dissemination of the information to the general public is thought to ensue from the application of the advice in these documents and results are monitored in data gathered by national household surveys.

Recent changes in data collection reflect this change in emphasis suggesting that it has now become more important to ascertain the percentage of the population whose levels of activity at moderate intensity fall below 30 minutes per week than it is to identify the percentage of the population which is meeting CMO recommendations for physical activity.

This may be due to reports of links between sedentary behaviour and the development of non-communicable diseases such as diabetes and cancer which are associated with ageing (Lee et al., 2012). Sedentary behaviour is judged as less than 30 minutes' moderate activity per week. Survey questions have been revised in two ways: on the one hand with the mention of specific sports and on the other in the way that participation is now recorded in instances of 30 minutes i.e. the lower limit of participation below which individuals are considered to be sedentary and at risk to health (Lee et al., 2012; Everybody Active Every Day, 2014). Instead of capturing a picture of percentages of people who are exercising at or beyond the recommended levels for physical activity this method draws attention to percentages of the population who are potentially at risk and need to be targeted with health advice and encouraged to change their behaviour. Reporting in this way makes it easier for sports providers to monitor lower levels of engagement; for local authorities to report on increases or decreases in engagement and to identify the percentage of the population which is considered to be at risk by reason of being insufficiently active. The statistics can then be used to influence policy and direct the flow of funding. As yet no data have been collected for strength training.

Apart from the rigour implied in scientific method, the choice to collect data on exercise by quantitative methods is, to some extent, driven by traditional competitive approaches in sport employing the notion of cause and effect. Skills are acquired cognitively, performance is measured using biometric markers and used to set targets for improvement. Barriers are identified and removed or overcome. Rooted in scientific method and aligned with a medical approach the data provide rigour but do not take account of the heterogeneity of society or that not everyone is competitive or interested in sport.

Approaches to social policy on ageing have been criticised for their reliance on similarly deterministic evidence collected via national surveys or 'Big Data' (Bengtson, 2016) rather than being grounded in ageing theory (Bengtson, 2016; Estes, Biggs and Phillipson, 2003). Evidence from surveys is extrapolated to be representative of the population but is devoid of the vagaries, anomalies, vicissitudes and general detail of people's lives. In consequence there can only be a rift between the picture presented by the data (macro level) and that of lived experience (micro level). Theory attempts to explain and account for situations and attempts to encompass the complexities of time, place and cultural context (Avis, 2005;

Biggs et al., 2003). The effect of not taking this wider view into consideration is demonstrated perennially when physical activity is referred to as being 'the "best buy" in public health' (Cooper, 2000); a 'cost-effective exercise for the NHS' (Munro et al. 1997); 'medicine for older adults' (Taylor, 2014) and on NHS Choices website (2014) 'If exercise were a pill it would be one of the most cost-effective drugs ever invented'. All express bewilderment at the apparent low uptake but focus on physical activity from a purely economic perspective.

Tulle (2008a) offers some explanation of this apparent failure to access health benefits that are freely available as being linked to the 'medicalisation' of exercise in a similar way that the older body has been pathologised. Health messages which invoke behaviour change imply the need to control the body and cloak the veiled suspicion that gratification may not be immediate or may involve commitment and discipline (Jallinoja et al. 2010). More fundamentally the quality of the endeavour involved may not be compatible with deeply entrenched beliefs about the unsuitability or unseemliness of exercise for women (Vertinsky, 2002). These barriers are especially prevalent in lower socioeconomic groups and amongst BME communities (Sport England, 2006). When exercise is conceptualised as health Tulle (2008a) regrets that the intrinsic value of physical activity seems to have been ignored, stripped of any notion of enjoyment.

In contrast to conceptualising exercise as 'a cure' for older people (Tulle, 2008a; Higgs et al. 2009), physically active older adults focus on the importance of affect in the experience of exercise (Phoenix and Orr, 2014) yet, when challenged, may attribute their activities to external factors. In unpicking the sub-cultures which relate to sport, fitness and health these authors remark that the dual imperatives of performance and/or health vary with the purpose of the activity being promoted. Other possible reasons for pursuing exercise are ignored. Wellard (2012), critiquing human movement studies, remarks that bodily pleasures have largely been ignored in favour of producing health-related measures. Yet Phoenix and Orr (2014) reveal the transformative power of pleasure experienced through exercise in helping to frame a positive ageing identity. Henwood et al. (2011) remark how physical activity may be used as a 'resistance tool' to slow down the processes of decline but results in an enhanced sense of self. Bennett et al. (2017) support this view, emphasising the multiplicity of emotions experienced within and beyond the timescape of physical activity to

construct and shape the ageing self. It appears that, at policy level, in the desire to demonstrate 'improvement' empirically the relationship to the older person gets lost. Furthermore, the impact on the individual of the processes which aim to make that improvement are ignored. When applied to older people health is the salient message (Smith Maguire, 2008). According to Tulle (2008a) the effect is to impoverish the exercise experience.

The focus on the 'will to health' (Higgs et al., 2009) which people are encouraged to pursue via becoming sufficiently active (Bauman et al., 2012; WHO, 2002) is underpinned by a cognitive approach. Health and its perpetuation are seen as the responsibility of the individual. However in a recent update (2016) on the original Lancet series (Lee et al., 2012) which announced the global pandemic of inactivity statistics show that though behaviour change mechanisms are having some success globally with health risks associated with lifestyle problems such as smoking, substance abuse and obesity the realms of sedentary behaviour are proving remarkably resistant. It would appear that health messages linked to physical activity are either being ignored or misinterpreted. A philosophical interpretation of self, as indicated in the work of authors such as Bennett et al. (2017) and Phoenix and Orr, (2014), may offer some insight into this phenomenon.

This section has considered the benefits of physical activity from the top down perspective of social policy. It has also hinted at the limitations of such a view. The section showed that policy is grounded in empirical research which attempts to address a perceived problem. Based upon that evidence, the development of reasoning that culminates in exercise promotion is closely linked to econosociopolitical considerations founded on the imperative of health. The medical perspective dominant in the original research has prevailed, thus foregrounding a Cartesian understanding of the self where the body is treated as separate from the mind and the mind holds sway over the body. Activity is preceded by thought.

An alternative view can be gained by adopting a phenomenological perspective. The next section explores how competing paradigms intersect with the notion of wellbeing and how this relates to the nature of exercise for older adults.

4.4. Adopting a phenomenological approach

Classical sociology has traditionally accepted the dualistic approach to the self with the subordination of the body to the mind but desacralization of society has disrupted and called into question traditional religious beliefs upon which certainty about the transience of the body was founded. Vestiges of this certainty abound in the mapping and measuring of the body for biomedical purposes or in competitive sports scenarios where body and mind are still treated as separate. However the process of reflexivity (Mead, 1934) promulgated by the pragmatists involving an individual's capacity to view the self both objectively and subjectively in an internal I/Me conversation, established the body as the foundation of the conscious mind, ergo an integral part of the self. Thought is embodied. It does not precede action as in the 'cogito' but is an integral part of a continuous process. The individual judges and adjusts his/her own behaviour in relation to meanings founded on interaction with others. The meanings begin to be formulated through the medium of the body from birth as the socialisation process takes place (Dewey, 1938). Ways of looking, feeling and acting are experienced and imitated through the body in accordance with social norms as well as age, gender, ethnicity and ability (West and Zimmerman, 1987; West and Fenstermaker, 1995; Laz, 1998. 2003). As a result identity is formed and expressed by 'doing' as well as 'being'. Merleau-Ponty (1962) emphasises the interactive nature of embodiment and identity. Grosz (1994) conceptualises the process as a Möbius strip (an inverted three-dimensional figure eight) where mind and body are inexorably linked in a stream of constant interaction, thus overcoming the mind/body split.

The Merleau-Pontian view extends beyond Meadian reflexivity and includes relational confluence. In terms of physical activity the relationship includes the environment of time and space, other participants and equipment employed in the activity. Participants experience a feeling of 'connectedness' and heightened state of embodiment (Wright and Dewar, 1997; Humberstone, 2011). Embodiment is also rooted in a social ontology that is interactive and relational (Gergen, 2009) and whose flexibility is foregrounded in the work of Goffman. In 'The Presentation of Self' (1959) Goffman discerns the capacity of the body to present a public self which recognises 'frames' or contexts for action and to adopt suitable 'scripts' to deal with the appropriate circumstances. Such frames and scripts can be applied to the conventions of specific exercise activities. Movements employed are

rehearsed and practised until they sink below the threshold of consciousness, becoming an embodied expression of the self (Booth, 2009). Drawing on the philosophy of Marcuse and his work on the senses Thrift (2008, cited in Booth, 2009) observes the merger of two approaches to analysis which have been conventionally kept apart i.e. the social and the biological. Furthermore Phoenix and Orr (2014) point out that 'emplacement' can be just as important as 'embodiment' for an individual's appreciation of a physical activity. Spatkes (2010) argues that the context within which the activity takes place is part of the sentient experience. Actions, senses, spatial and temporal conditions are all interlinked as the experience of the action enjoins with and reacts to conditions in the environment, for example in windsurfing (Humberstone, 2011; Dant and Wheaton, 2007). The experience is agentic, relational and contextual.

4.5. Bridging the gap from determinism to interpretivism

Some theorists have already warned against the dangers of adopting an overly deterministic approach to the relationship between physical activity, health and ageing (Smith Maguire, 2008; Phoenix and Orr, 2014). Stewart et al. (1993) described the majority of evaluated exercise-related health outcomes as distal to the exercise itself e.g. reduced risk of heart disease or premature mortality. This is particularly the case when promoting physical activity to older adults (Smith Maguire, 2008). The essence of what is known about ageing and physical activity derives primarily from measurement and observation (Baltes and Mayer, 1999; Faircloth, 2003; Katz, 2005; Dionigi, 2006; Grant and Kluge, 2007; Phoenix and Grant, 2009). This is not to decry or undermine the value of that knowledge but to highlight its limitations. Grant and Kluge (2007) are critical of the way that research in physical activity favours quantitative inquiry even when subjective data is generated and advocate an expansion of the research agenda. The sentiment is echoed by Markula, Grant and Denison, (2001); Polivka and Longino, (2006) and Phoenix and Grant, (2009). Opinions sought and analysed by quantitative methods admit dissimulation on the part of the respondent and exclude the diversity offered by detailed responses. A prime example of this is the Active People Survey (2014) in which people aged 19 and over were asked in a telephone survey to say what motivated their participation in physical activity. One of the aims of the survey was to identify and create profiles of typical groups of sports participants.

Given this aim complexity was excluded right from the start by restricting reasons for motivation to participate in physical activity to the following eight responses:

Just enjoy it Keep fit Meet with friends Take children Competition
Help with injury/disability Lose weight Improve performance

(cited in Wellard, 2014)

‘Just enjoy it’ was the most highly rated response, followed by ‘keep fit’ but there was no attempt to learn how the enjoyment was experienced or to discover why it accounted for being the main source of motivation for exercise (Wellard, 2014). When expressed as an unqualified determinant enjoyment is framed as an outcome of exercise without reference to the processes experienced in its production.

The omission of detail and formation of categories of exercise participants which the above practice entails leads to assumptions being made about the homogeneity of the members of the emergent groups. This is the same pitfall that quantitative data fall into when used to produce normative descriptors of ageing and physical ability for the purpose of comparing individuals at different stages of the life course (Phoenix and Grant, 2009).

It is in this vein that Piggin and Bairner (2014) are critical of adopting a systems approach to solving the global problem of inactivity advocated in the Lancet series (2012). They argue that such systems deployment does not address the immense diversity of lived experiences which do not abide by idealistic recommendations. Their position supports Grant and Kluge’s (2007) claim that other bodies of knowledge should be employed to make sense of ageing and physical activity i.e. multiple forms of inquiry aimed at understanding ‘the many dimensions of a person including their personality, their psychological and emotional make-up; their previous life experiences, beliefs and values; and the effects of the environment on a person’s life’ (Grant and Kluge, 2007, P.399).

Narrowness of approach to understanding motivation for physical activity on purely health grounds is highlighted by Booth (2009) who remarked upon the ‘deafening silence’ which surrounded any notion of pleasure associated with physical activity. The work of Coveney and Bunton (2003) offers an explanation of such silence though maybe unintentionally. They relate the notion of pleasure to the development of religious ideas in western cultures

where hedonism might be equated with transgression. When pleasure is encountered as a source of shame and a reason for social censure hedonistic pleasure is kept for private enjoyment rather than public broadcast. However in religious terms disciplined pleasure and that which arises from asceticism are prized and celebrated. The parallel to the dualistic notion of self, separating body and mind, and used in the medical approach to health and exercise is clear. Both approaches to the body are underpinned by Cartesian philosophy. Paradoxically however, rather than relegating the pleasure which accompanies physical activity to the status of empty hedonism, medicine seeks – if unwittingly - to mobilise its potential for health improvement. Focusing on the purpose of physical activity frames the attendant, if unrecognised, pleasure in the Aristotelian eudemonic sense i.e. that there is purpose involved in pleasure leading to satisfaction in achievement. However health improvement authorities have been slow to realise the importance of pleasure or enjoyment in encouraging the uptake of exercise or its significance as an expression of wellbeing. Tardiness to recognise the value of the hedonistic pleasure integral to physical activity in promoting health can be explained by the fact that most behaviours which incorporate hedonistic pleasure can be detrimental to health e.g. misuse or abuse of food, tobacco or other substances. In these cases health promotion teams are incited to modify or seek cessation of the behaviour entailed in order to enhance health (Jallinoja et al. 2010).

However there are examples of behaviour change interventions which attempt to address wider issues. Targeting self belief, encouraging an exercise identity and the use of positive language have all had some success in promoting physical activity (Whaley and Ebbeck, 2002; O'Brien Cousins, 2001; Wolff et al., 2014). By designing exercise interventions to respect participants' personal preference Hagberg et al. (2009) found that people responded more enthusiastically and adherence was prolonged. They were able to demonstrate how the purposeful inclusion of enjoyment in health promotion exercise schemes and interventions can promote behaviour change and lead to greater long-term effectiveness. However effectiveness of all of these techniques relies upon a cognitive approach and the mastery of mind over body. Consequently enjoyment is seen as an outcome or product of physical activity rather than the dynamic, embodied process which might better be explored by adopting a phenomenological approach.

This chapter now seeks to plumb the characteristics of physical cultures which draw people to them and to explore how these qualities are experienced. The notion of wellbeing provides a point of entry to this discussion as it has already been recognised by the positivists as an undeniable outcome of physical activity if not as a process which accompanies the experience of participation.

4.6. A phenomenological approach to wellbeing, pleasure, enjoyment.

From a phenomenological perspective the body is the basis for all human experience (Merleau-Ponty, 1962). In 'doing' physical activity the body is always in a state of 'becoming', (Laz, 2003). It is a dynamic process similar to ageing, during which positive affect can be experienced. As Griffin (2010) points out, 'sport is inescapably both physical and embodied' (Griffin, 2010, p.154). The cycle of skills acquisition and practice leads to action occurring below the threshold of consciousness so that thought does not precede action in a Cartesian manner but is part of a continuous interactive process (see Allen-Collinson, 2009 for sport specific examples). The capacity to see oneself both objectively and subjectively in the process of reflexivity (Mead, 1934) is integral to embodied experience.

Wellard (2012) recognises the possibilities that the flexible nature of wellbeing presents in its ability to be interpreted reflexively, as both an outcome and a process for bridging the divide between positivist and interpretivist accounts. Drawing on the work of Connell and body-reflexive practices (2009) he argues that, as an embodied process, wellbeing is synonymous with the pleasure or enjoyment that is encountered during engagement with physical activity. However unlike the objective pleasure that can be observed when athletes respond to the adulation of the crowd as a result of sporting success, subjective phenomena are not as evident. Pleasure as outcome can be quantified in relation to receiving medals, position on league tables or other signs of achievement for example. In relation to pleasure as process, Booth (2009) maintains that the punishing regime required to attain competitive excellence may be justified by the outcome but serves to constrain, if not destroy any other form of pleasure. Besides it is not a route that most people choose to follow (Tulle, 2008a). The subjective pleasure experienced through process can only be properly appreciated through detailed description or narrative. Wellbeing in this sense is not a top-down entity which is produced externally e.g. in response to the cheers of the crowd, but the continuous experience of embodied action.

Wellard (2014) turns to Sartre (1954) for an explanation of how embodied experiences of physical activity may differ while remaining part of an overall corpus of experience defined by positive affect. Embodied existential experiences stimulated through the senses allow the body to 'feel', become aware or conscious of its presence in the world. Exercise participants are aware that being physically active changes the way that the body feels (Phoenix and Orr, 2014). In the circuit of body-reflexive pleasure a reflection is an act of consciousness. Sartre contends that every act of consciousness becomes an object. The view resonates with Mead's (1934) conception of the reflexive self where the subjective 'I' and objective 'me' are in continuous interaction with one another. For Sartre each reflection is consciousness of consciousness itself but as a distortion based upon present expectations. Thus, memories of enjoying physical activity cannot be separated from enjoying the current experience and are positively recruited in perpetuating engagement with physical culture. O'Brien Cousins (2001) remarks upon the advantage of being able to identify and tap into this dimension of previous experience when promoting physical activity as behaviour change. Phoenix and Orr (2014) demonstrate how pleasurable physically active experiences, when documented, can be revisited, enjoyed again though in a slightly different way, at a later date and with other people. The sensual experience which accompanied the original event remains a powerful feature in recall. Classen et al. (1994) contend that different sports have different 'smellscapes' that change according to temporal or seasonal conditions. Tuan (1995) remarks on the capacity of smells to invoke memory. Thus the aroma of new-mown grass or the sharp smell of chlorine may bring to mind a recent experience of enjoyment in physical activity.

The changing trajectory of documented pleasure associated with engagement with cultures of physical activity is just one of the four 'types' of pleasure which Phoenix and Orr (2014) identify from their interviews with physically active older adults. The other three are sensual pleasure, habitual pleasure and the pleasure arising from immersion in the activity. They are all experienced in a similarly embodied and reflexive manner. For Merleau-Ponty (1962) all embodied experiences are situated and relational. Hence, pleasure experienced through the senses is linked to time, place, objects and other individuals. This accounts for the changing experience of pleasure which is documented. The embodied activity is primarily situated within a developing anthropology of the senses (Howes, 2003) and also to some extent

depending upon the nature of the activity, within an emergent 'sensuous' geography (Rodaway, 1994). The bodily practices are directly relevant to the activity of the participants as they move, see, hear, feel, touch and smell their environment. (Hockey & Allen-Collinson, 2007).

Windsurfers remark upon the feeling of being at one with the elements and with their equipment brought to them by the necessity to respond instantly and reflexively to changing conditions for the effective pursuance of their sport. Humberstone (2011) speaks of 'the strong awareness and connections to the environment through the senses of the body highlighting the sentient nature of embodiment' (2011, p.2). The body reacts to and anticipates the mobility and fluidity of the elements. Dant and Wheaton (2007, p.10) emphasise the significance of haptic knowledge, saying that windsurfing 'requires a fine interaction between the sailor's body and the kit: there is a complex "material interaction" between the material capital that is in the objects of the kit and the embodied capital that is in the body of the sailor...The two hands, the two feet and the hips or torso all need to make fine adjustments that alter the relationship between the rig and the board'. The sensory experiences work in concert (Howes, 2003) and constitute the direct, lived experience which can be captured through images and the written word and reconceptualised on multiple later occasions. For example, as Ingold (2000) points out, movement is axiomatic to sport, however the memory of engagement is more likely to be experienced in static dimension. Gergen (2009) emphasises the significance of temporal and spatial relations involved in the separate experiences. There is an ontological difference signalled in the moment of performance by Husserl's notion of 'epoché' where elements superfluous to the experience are bracketed out (Allen-Collinson, 2009). The heightened consciousness or pleasure experienced when the body is in perfect tune with the nexus of time, place, equipment and elements is what Phoenix and Orr (2014) refer to as a state of immersion but has earlier been described as 'flow' (Csikszentmihalyi, 1975). Humberstone (2011) contends that in the performance of windsurfing the state constitutes a spiritual experience.

The feeling of immersion or of being at one with the world is reflected in experiences in other physical cultures. For example in yoga where the complete fusion of mind and body occurs and an alternative plane of consciousness is reached, participants report feelings of great calm and wellbeing (Humberstone and Cutler-Riddick, 2015). Their experience,

according to Throsby (2013) is affectively transformative and the state enables them to gain insight into events and problems of their daily lives. Professional ballet dancers speak of how dance defines them because their art permeates every aspect of the dancer's life: 'ballet pushes us to the edge of who we think we are' (Bussell, 1998: 4). The embodied sense of rhythm and timing requires a highly developed awareness of sensations emanating from an assemblage of organs, ligaments, tendons and muscles as they move (Wainwright and Turner, 2003; Hockey and Allen-Collinson, 2009). Ralston (2005) reports similar transformative effects and affects experienced through solo walking. Nettleton (2015) remarks on the arduous challenges that fellrunners willingly accept irrespective of the risk of physical damage, in the pursuance of their favoured physical pursuit. Feelings of wellbeing are evoked by the sense of being in tune with the elements and the environment.

In other physical cultures place can be important in stimulating a whole sequence of related experiences of pleasure. Sparkes (2010) refers to the gym as a 'sensorium', remarking upon the sights, sounds and smells that accompany his anticipation of exercise as well as the exercise performance and the aftermath. Positive affect changes across the trajectory of the experience as body-reflexive practices vary and give rise to body-reflexive pleasures of equally varying dimensions. He refers to an embodied sensual experience of performing a satisfying workout which involved chest presses in which he experienced his whole being as his chest (2015) but his later dissatisfaction with the ageing state of his belly served to militate against the memory. On a more positive note Phoenix and Orr (2014) found that documented accounts of pleasurable experiences stimulated the desire to plan further exploits and to fire expectations of further embodied pleasure. In Sparkes' example he owns that he becomes conscious of his ageing body because he is engaged in conversation with a younger woman. Hence the pleasure is mediated by the memory of a younger self and forms part of the shifting chain of conscious reflections (Sartre, 1954) that form the corpus of enjoyment experienced through physical activity.

Burkitt (2012) highlights the emotional dimensions of reflexivity offering an explanation of how the power of motion binds together sensual and relational experience. He explains that emotion 'is central to the way people in social relations relate to one another: it is woven into the fabric of the interactions we are engaged in and it is therefore also central to the way we relate to ourselves as well as to others' (2012: 459). Considering the world in terms

of relational confluence, Gergen (2009) asserts that people are primarily relational beings and that as such 'we exist in a world of co-constitution' (Gergen, 2009: xv). Meanings attributed to an activity are shaped dynamically in the performance and evaluation of the activity.

Performing an activity on a regular basis with an established group of people reflects this dynamism. Phoenix and Orr (2014) note how the effects of habitual action contribute to extending or perpetuating the sense of pleasure in exercise. They comment on the way that people look forward to their regular exercise session feeling comfortable in its predictability, their expectations of the environment, the likely events and the shared meanings of their fellow exercisers. Their findings resonate with Wellard's (2012) work on body-reflexive pleasures and provide evidence of the processes which O'Brien Cousins (2001) sought to recruit in promoting behaviour change and adherence to exercise. The memory of positive affect drives the desire to repeat the experience regularly and so promotes adherence.

Furthermore Phoenix and Orr (2015) demonstrate the centrality of enjoyment or pleasure to the experience of older adults who engage in physical activity. They signal its especial importance for those who may find the process of exercising painful but who sustain their efforts for the attendant benefits that it brings or because they find the experience life-enhancing. A process of cognitive reframing is involved during which individuals adjust their expectations (Piran, 2016). In these cases the body may constrain pleasure and yet still be the medium through which feelings of wellbeing are reached. This finding is in line with research and theorising that a focus on continuity of the self is beneficial to exploring older adults' experiences of physical activity (Phoenix and Grant, 2009; Phoenix and Smith, 2011; Phoenix and Sparkes, 2009; Tulle, 2008b). Individuals are able to experience happiness and wellbeing in later life despite changes in health and body function (Bennett et al., 2017).

4.7. The importance of a social dimension

Ekerdt and Koss (2015) point out the significance of routine for older people especially at the transitional stage of leaving the labour market and moving into retirement. Habitual activities provide a framework to replace the old roles and responsibilities. They give people the opportunity to express a new sense of identity, to maintain control and to operate time sovereignty. In this way, new social networks replacing those of the work environment can

be established. The availability of more time also gives potential for experiencing a greater range and choice of activity than that offered by the former work environment. Expounding the notion of the 'Third Age' Laslett (1989) argues that in these new networks meanings are co-constructed and provide the pleasure of self-actualisation. That physical activity is well placed as a focus for forming such networks is demonstrated in the work of Bidonde (2005). Older women, in particular, enjoy engaging in physical activity with others as it fosters interpersonal connections and a sense of belonging (Bennett et al., 2017; Bidonde et al., 2009; Chrisler and Palatino, 2016; Evans and Sleaf, 2012; Heuser, 2005; Kluge et al., 2012).

The gendered experience of ageing leads to women's social networks diminishing rapidly as they age. Both sexes retire from the labour market and their parenting roles diminish as families grow up and move away but women live longer than men, may lose friendship contacts when they are widowed and can easily become isolated and fall into depression as a result. Starting from the premise that everyone has a body and is capable of at least some movement, Bidonde's exercise classes provide women with a purpose for meeting. They offer an opportunity to establish a new rhythm or routine in life and can lead to new support networks being formed with attendant positive affect.

Interpreting the data from the evaluation of a group walking intervention, Hockley and McCormack (2016) argue that motivation to sustain the activity beyond the period of the intervention stemmed from the opportunity for social interaction rather than from the activity itself. Pretty et al. (2005) reflect on the positive effects on mental health of being outdoors and in touch with nature. Moreover reduced feelings of isolation (Dawson et al., 2006) have an uplifting effect on mood. Focusing on the activity of group walking Hockley and McCormack (2016) argue that the practice unites people both socially and physically in the milieu of the environment. The activity provides an arena where people can engage in conversation free from the prejudices which might involve them elsewhere. Sharing the rhythm of movement engenders behaviours of reciprocity and meanings are 'talked into existence' (Hockley and McCormack: 133). As a collective practice walking promotes communal fellowship (Lee and Ingold, 2006). Sharing the rhythm of walking becomes inseparable from talking. Embodied action promotes social bonding. Performed side by side rather than face to face such full body interaction appears to have advantages for promoting companionship (Lee and Ingold, 2006). Fellow walkers are aware of each other's

bodies but rarely look at each other. The conversation ebbs and flows with the measure of personal effort demanded to confront the terrain. Lee and Ingold (2006) maintain that similar social bonds are produced in some forms of dancing and in martial arts.

It appears from Hockley and McCormack's (2016) evaluation of their group walking intervention that allowing sufficient time for these bonds to form is an important factor in the success of the intervention. Adherence to the activity is concomitant with the social bonds formed and the expectations of pleasure in further engagement. The phenomenon resonates with Phoenix and Orr's (2014) findings relating to pleasure in exercise and to Nimrod's (2007) argument that adherence to recreational activities is associated with their integration to lifestyle.

This section has investigated how the link between health benefits and physical activity established by quantitative research might be better understood by the incorporation of knowledge from other research perspectives. The last section of this chapter attempts to investigate how the competing paradigms that underlie approaches to physical activity are represented in exercise provision.

4.8. Paradoxes and problems of provision

In his work on the leisure industries Roberts (2004) identifies three sectors of provision: commercial, public and voluntary, pointing out that the nature of provision is determined by the aims of the sector. Consequently profit is essential for the survival of the commercial sector while the voluntary sector is driven by enthusiasm. The public sector is far more complex. It has the capacity to promote, subsidise or ignore any activity based upon its relevance to government policy of the day. Hence the promotion of pleasurable activities might be expected to be endemic to voluntary sector activities yet researched for their impact on market forces in the commercial sector. However the pleasures engendered by physical cultures do not yet seem to have been embedded in public policies which seek to reduce inactivity.

Paradoxically Age UK has criticised health professionals for not prescribing physical activity. While examples of 'green prescriptions' do exist (Handcock and Jenkins, 2003) they are based upon a biomedical view of the body and founded on cognition rather than the pleasure of movement. Age UK's programmes, 'Inspire and Include' and 'Get going together'

focus on a more phenomenological approach to exercise. Their strategies 'Towards an active nation' and 'Sporting Futures' however incorporate notions of health and of competition.

From a life course perspective the landscape of physical activity provision has changed since before the Second World War when much was organised by Workers' Cooperatives and was essentially non-competitive in inspiration (Wheeler, 1978). Emphasis on competition accompanied the codifying of sports and the introduction of league tables (Socialist Worker, 2012). The emergence of a commercial 'leisure / fitness industry' centred on gyms and health or leisure centres or clubs parallels the trajectory of adult lives post World War Two. For older adults with sufficient financial resources, or where there are local authority sponsored leisure schemes, the local leisure centre forms a hub which can attract people into physical activity and provide a place where social networks can be stimulated. In some areas the leisure centre performs the functions of a community centre. Gym membership in the 55+ age group increased 343% from 1987 – 2003. Curiously during almost the same period, 1986 – 2005, Ramblers reports a 32% decrease in the average proportion of journeys of foot. Sport England (2004) however were involved in investigating barriers to participation and reported that poverty was a prime cause of exclusion. Even if exercise schemes were heavily subsidised the cost of transport to the venue and the journey time involved could still be prohibitive.

By comparison, Colin Milner, CEO of International Council on Active Ageing, asserts in 2016, 'For about the past 15 years the baby boom fitness market has been slowly growing but in the last several years it has really exploded, and it's exploded in many segments, including health club membership'. Over the last twelve months gym membership has risen from 8.8 million to 9.2 million marking it out as an attractive prospect for financial investment in the commercial market. Participation is counted in economic terms as opposed to quality of experience. It is assumed that quality of experience equates to adherence to the activity.

In her research into leisure centre provision Sassatelli (2014) recognises the significance of meaning and purpose in physical activity and that the exercise experience itself should be satisfying. She argues that the notion of fitness amongst the physically active population at the beginning of the twenty-first century constitutes a dual process. On the one hand it is aligned with sport and on the other with consumption. When seen as a leisure pursuit

entailing 'fun' it is essential that the provider ensures constant novelty and variety to keep clients engaged. She stresses that the type of fun which is experienced through gym exercise has to be institutionally organised with individual programmes carefully written to respect personal desires and attributes. She frames these sessions as 'commercial entertainment' which are socially patterned. However reports of 60 -70% dropout rates in the first year of membership (Evening Standard, Jan. 2016) do not support the effectiveness of current strategies and indicate the need for further research to develop understanding on the part of service providers into what constitutes client satisfaction.

Further conflicting evidence arises from research commissioned by the UK Trade Body for Retirement Villages (ARCO, 2015). In a survey of one thousand people aged 65+, the majority of respondents stated they would like to be more physically active but were deterred by a range of practical and financial barriers. 29% said they were put off by the cost of fitness venues. Nearly one in four said they felt self-conscious in environments such as gyms as these facilities were often dominated by younger people and 22% stated that the facilities did not accommodate the needs of older people. There was a gendered response to feeling able to attend a leisure facility alone with 28% of women saying they would go if they had a friend to go with, versus 17% of men. A further 37% reported medical reasons for not taking part in exercise. The report concludes with a justification for customised health and leisure facilities to be incorporated into retirement villages. However, only 0.05% of the UK population 65+ live in these villages.

Gym provision via local authority leisure centres entails a commercial imperative as many local authorities contract out their leisure centres to commercial operatives. They may offer a subsidy to local people and offer value for money with other activities under the same roof but the location of the venue may involve a transport cost.

For Booth (2009) 'the intrinsic attraction of pleasure offers an allure to physical activity far stronger than health and social relationships, notwithstanding the pleasures they too may induce' (2009:47). Data from the survey above suggest that there are barriers to be overcome to enable people to access that pleasure.

Indeed, exclusion from these more formalised forms of physical activity does not exclude people from all forms of pleasure that exercise can provide but limits their choice of activity

and place in which it can be performed. Imaginative leadership has been shown to pay dividends in encouraging engagement in community walking schemes. For example the Leeds City scheme begins with a meeting over a cup of tea; individuals make a point of calling for one another and leaders organise observational competitions which build in an appreciation of the environment (Battle, 2016). The British Heart Foundation pioneered a series of initiatives under the banner of 'Health by Stealth' (2014) which engaged people holistically.

According to Nimrod (2007) the key to all activity for older adults is the notion of 'essentiality'; that whatever pastime offered or chosen should have meaning and have the possibility of being fully integrated into lifestyle. Hockey and Allen-Collinson (2007) frame this as 'intentionality'. The idea harks back to Sartre's (1954) notion of consciousness of consciousness and the way that the memory of a former experience is recruited in the desire to repeat actions which produced that experience. Lazarus (1999) contends that emotions arise as a result of meaning assigned to activity. All these conceptualisations are underpinned by a philosophy which militates against the separation of mind and body but view the self as the prime mover at the centre of experience.

This section has attempted to show how the approaches to promoting physical activity are fragmented. It has been demonstrated in the literature that 'one size does not fit all' (Phoenix and Grant, 2009; UKActive, 2016) and that multiple methods are necessary in order to appeal to multiple tastes. However the picture produced here bears witness to the 'fracture' identified by Phoenix and Tulle (2016) between natural and health sciences that dominates the philosophies of exercise provision for older adults and that inhibits progress in addressing the 'pandemic of inactivity' (Lancet, 2012).

4.9. Summary

Quantitative studies have provided the evidence and justification for encouraging people to engage in physical activity. However statistics on inactivity (WHO, 2012) suggest that the guidance based upon these findings has been insufficient to influence levels of engagement significantly. Notwithstanding, effectiveness of exercise provision tends to be monitored and measured solely by positivist outcomes irrespective of provider and intended aim of exercise. Research literature and commercial surveys both indicate the need for an

alternative vision for the benefits of exercise to be effective in enhancing the lives of an ageing population. Notions of wellbeing are currently being explored as a spur to promoting health and exercise.

The chapter demonstrates that while there are external pleasures related to engagement with physical cultures e.g. those associated with competition, winning, the cheers of the crowd and reviewing the event retrospectively, the majority of positive affect is embodied and experienced reflexively. Enjoyment occurs on both levels: hedonistic – in terms of the actual experience and eudemonic – in terms of a purposeful outcome, and is different for different people, in different situations and for different activities (Allen-Collinson, 2009). Many of the pleasures are exercise culture specific. Some are the product of solitary action whilst others emerge from being a member of a group or from the synergy that is produced by performing movements in harmony or unison. The literature indicates that the width and variety of experience of pleasure arising from physical activity is as extensive as the choice of physical culture available.

A phenomenological approach to understanding participation suggests that while health is important it is not inspirational in encouraging engagement. Factors surrounding provision indicate the necessity for sectors to work together.

Chapter Five: Methodology

5.1. Introduction

The overarching aim of this research is to improve understanding of the factors which lead people to engage in physical activity so that the knowledge can be used to increase participation especially amongst older adults.

In the introductory chapter I showed why such an aim is considered relevant in the context of current demographic change and how the research background supports the importance of being physically active. The purpose of Chapters Two and Three was to situate participants' perceptions of ageing and the life course against the evolution of Western culture. This chapter discusses the nature of reality involved in evoking such elements as perceptions, beliefs, values and culture to address the principal purpose of the research. It traces the methodological decisions made in the process of aspiring to achieve the research aim. It defines the nature of reality within the parameters of lived experience and describes how that reality will be accessed, verified and recorded.

5.2. The research aims, questions and objectives

To achieve the overall aim I aspire to identify factors which encourage the older adults in this study to engage in exercise. Recommendations can then be made on the basis of what has been shown to work and how it works. The intention is that the findings of this study can inform future provision and lead to the increased participation in exercise as people age.

Three research questions frame the stages by which the aim is to be achieved:

- How are the processes of ageing perceived?
- How do these perceptions relate to engagement with exercise?
- What are the implications for social policy and the provision of exercise?

Mapping the environment of participants' current and former experience of engagement with exercise creates an overall impression of the research field and the participant group and provides a springboard into the research. This preparatory stage allows issues to emerge that can later be addressed in greater detail. Three principal objectives build upon this preliminary work.

The first objective is to compare and contrast participants' perceptions of the ageing self with existing theories of ageing and to further investigate the themes which arise. Then to examine how perceptions of the ageing self relate to the body and how it is given meaning in the exercise class. Some theories of ageing can be of limited helpfulness when interpreting data relating to engagement with exercise because they are of generic significance and predate the research into the health benefits of exercise and the current discourses aimed at encouraging people to take up exercise. This objective aspires to fulfil the requirements of the first research question.

A second objective involves examining the stories which participants tell about former experiences of exercise across the life course. I seek to identify how the experience of schooldays and the succession of life course events that determine the rhythm and pace of life produce factors which shape current engagement with exercise. In addition to personal experience I take into account the influence of social discourses, social change and possible cohort effects. I then return to current experience and the nature of the exercise class itself: what draws individuals to specific cultures of exercise; why they stay and what they gain from the experience.

Thirdly I look at the nature of exercise provision: the administrative structures fundamental for the existence of the class and the teaching and learning strategies which give it life. Information and understanding gained in the course of achieving the second and third objectives intersects with that from objective one and provide the groundings for addressing the second research question: how perceptions of ageing relate to engagement with exercise.

An analysis of the findings from all of these objectives provides the basis for responding to the third research question: what are the implications for social policy and the provision of exercise?

5.3 The choice of Research Paradigm

The research questions begin by focusing upon the exploration of perceptions of ageing. Hence the form of knowledge implied is subjective, complex and shaped in the social arena. Sparkes (2002) explains that knowledge constituted from a subjective view of reality is not

only historically and contextually bound but is constructed through a process of reflexive mediation.

When considering how perceptions of ageing relate to engagement with exercise it is important to study the meanings that are ascribed to action (Schwandt, 2003). Weber (in Polkinghorne, 1983) makes a distinction between studying behaviour and action, pointing out that behaviour can be studied quantitatively, viewed from a positivist perspective, its incidence measured or links made between cause and effect. Action, however, is meaningfully initiated and so requires a qualitative approach. When the action of engaging in exercise is studied within the context of everyday circumstances, beliefs and values may emerge which impact on perceptions of ageing.

Spirduso (1995) points out that every life experience has four dimensions – physical, mental, social and spiritual - and advises that deeper understanding can be gained from studying the interactions between these dimensions. Van Manen (2007) advocates that the existentials of spatiality, corporeality, temporality and relationality should be considered in order to produce a holistic description of the lifeworld. Sartre (1954) takes account of such existentials in his view of consciousness. The mutability implied echoes Sparkes' (2002) approach to the significance of reflexivity. The repetition of a familiar or habitual act may be perceived in a slightly different way each time it occurs. Sartre (1954) argues that not only may there be existential differences but that each performance constitutes a single and separate moment of consciousness. Each act reflects or builds upon earlier similar moments of consciousness forming a corpus of experience but each one remains unique. Thus the reality is internalised and becomes an integral part of self but it is also socially constructed because it is relational and interacts with circumstances at the moment of production. These arguments are taken into consideration when interpreting qualitative data in order to create a sincere representation of the lifeworld as it is experienced by the participants (Sparkes, 2002).

5.4. The interpretative paradigm

The interpretivist paradigm is characterised by a concern for the individual, focuses on the intentions of social actors taking action rather than the causes of behaviour and has, for its central endeavour, the aim to understand the subjective world of human experience

(Cohen, Manion and Morrison, 2007). From this position knowledge is seen as being socially constructed and, since the social world is dynamic, in a constant state of flux (Silverman, 2000). Knowledge, 'the primary goal of research' (Hammersley and Atkinson, 1983: 17), too is continuously evolving, changing and defined by circumstances and context.

From an interpretivist position the researcher sets out to see phenomena in their natural context and to treat actions as part of a holistic social process rather than extracting them to be studied in isolation. Exercise is not an object in the sense of a drug to be tested for its effects upon the body which are beyond the control of the patient. Instead it is an embodied experience and the exerciser can vary the intensity, duration or type of activity involved with little reference to external agents (Tulle, 2012). Spirduso comments upon the restricted understanding produced when the four dimensions are studied singly from a positivist perspective. By adopting an interpretivist position it is possible to see these four dimensions in relation to one another in an ever-changing network, creating a nexus. (Tulle, 2008b; Tulle & Dorrer, 2012). The focus of my study is on lived experience and on the detail of human life, as in a case study, rather than on broad concepts. The consequent nexus might be appropriately applied to the whole assemblage of the data that this inquiry seeks to gather. Theory does not precede practice in the form of a hypothesis to be tested but emerges inductively from the exploration of naturally occurring data.

Hence, dealing with a subjective view of the world, an interpretivist approach allows values and beliefs to become visible to the researcher. It is values that 'provide the key to any understanding of the nature of current social conditions, their past and their future' (Hammersley and Atkinson, 1983: 15). My research focuses on 'how' questions rather than 'what' and seeks to probe these initial impressions for a deeper understanding of the meanings people attach to ageing and engagement with exercise. Consequently an interpretivist approach is more suited to the questions to be explored as qualitative methods will allow rich descriptive data to be produced.

5.5. The place of the positivist paradigm in this study

However, while the positivist paradigm is rejected for the purposes of this particular study it is important to acknowledge its place in the processes which led to the initiation of the research questions. Evidence that too few people do too little exercise to experience a

health benefit (Skelton et al. 1999; Chaudhury and Shelton, 2010) originates from the work done via random controlled trials and surveys inspired by a positivist approach where a specific research variable is identified and measured by observing it in isolation from surrounding factors (Williams and Wilkins, 1995). Awareness of, and respect for, the findings of such work was instrumental in creating my desire to pursue further research rather than the desire to replicate it. My own training as an instructor was informed by the findings of such positivistic studies and consequently inspires the structure and strategy that are fundamental to the exercise sessions I lead. It has also been possible to identify barriers which prevent people from engaging with exercise by employing positivist approaches. In all these cases the focus is on quantitative measures and an external reality rather than describing the quality of reality and how it is experienced.

Participants in this study are exposed to this approach to measurement through processes designed to assure quality of service. The service provider asks learners to assess the quality of their experience using an integer attached to a brief descriptor (see examples in appendix). Such practices are used to demonstrate that levels of quality are being maintained but omit any reference to what quality actually entails. The assumption is that everyone shares a common understanding of the meaning of each descriptor. A similar approach is used to monitor and assess progress. Integers and descriptors are used at the beginning of term and then reapplied at the end of term to demonstrate improvement in exercise performance but similarly provide no detail about the nature of the improvement. This study acknowledges the continued existence of these practices, their external application to the participant group and the antecedents upon which they are based. By its mere existence the knowledge that they produce contributes to this study as part of lived experience and is taken into consideration as part of the social environment to be studied. However the current inquiry requires more detailed and nuanced data to make visible the experience of the participants. The emphasis is on words and ideas rather than measurements and regularities (Sparkes & Smith, 2014). It does not seek to establish norms for it embodies a view of social reality that is constantly changing and iteratively created by individuals. A positivist perspective is not suitable for providing such information and an interpretative approach is indicated instead.

5.6. Ethnographic theory

Hammersley and Atkinson (1995) argue that ethnography is in many respects the most basic form of social research. Not only does it have a long history but its methods bear most resemblance to the routine ways in which people make sense of their world and it has the ability to draw on all forms of data. An ethnographic approach is particularly suited to this study, not least because the researcher is already firmly embedded within the sample population to be studied. Having an established role in a community whose acceptance of the importance of the research endeavour is apparent in their willingness to participate gives the widest possible access to lived experience. On the other hand such lack of 'strangeness' could be considered a weakness to the research on the grounds that prior knowledge of the group might suggest friendship and a lack of critical distance. However the role of instructor already invests the researcher with a professional persona and requires me to view individuals from a critical perspective. Just as the ethnographer is the instrument of the research, the instructor is the vehicle for the safe provision and effectiveness of the exercise. Proximity in age has the advantage of enhancing understanding of what it feels like to inhabit an older body particularly in terms of reduced energy or restricted range of movement but life conditions such as status or ethnicity militate against assumptions being made purely on the basis of personal experience.

Ethnography seeks to understand reality in the social world by studying everyday experience and identifying the beliefs, values and judgements that underlie action and the shifting meanings and nuances that result from interaction. Ethnographic research has been criticised for its looseness of definition (Hammersley, 1990) and its overlap with traditions such as phenomenology, hermeneutics or narrative inquiry. But it is precisely this looseness which makes it so pertinent to a study which is closely defined by time and place in that the participants assemble as a group for only one hour per week for the purpose of their exercise. Yet the content and interaction which takes place within that short space of time has implications for life beyond its temporal boundaries. Furthermore the choice to engage in the exercise session and the meanings ascribed to it reach back to earlier events and experiences that have contributed to shaping them along the life course. Wolcott (2010) lists twelve characteristics of ethnographic research. The list suggests that ethnography is holistic, cross-cultural, comparative, authentic, real, intimate, non-judgemental, descriptive,

specific, adaptive, corroborative and idiosyncratic. He is also quick to point out that none of these characteristics are indispensable to a study and that there is no single all-purpose definition or model of ethnography. Since ethnographies are contextually based and differ to the extent of each being an original work that cannot be repeated even by the same researcher with the same participants the mix of characteristics will also vary in response to the changing circumstances which accompany the course of my study. Instead ethnography provides the eclectic approach to social research which unites and theoretically underpins all of these perspectives in this study. The resultant narratives take the form of a case study where the focus is on a contemporary phenomenon within a real-life context (Yin, 1994). The approach will be idiographic as it will elucidate the unique features of the case (Bryman, 2001).

In summary ethnographic research allows data to be gathered from a range of sources appropriate to the population being studied. It also relies heavily on participant observation as a means of establishing the trustworthiness of the data. All sources can then be interpreted for meaning and reported in a final account which is itself an ethnography (Silverman, 2000; Sparkes and Smith, 2014).

5.7. The role of the researcher

A relatively unusual feature of my study is the complexity of my role as researcher. I count myself as a peer of participants to be studied and am an integral part of the population to be studied on the basis of being the group's exercise instructor. The position is ideal for ethnographic research to be conducted as, though I am the ethnographer, I am not a stranger to the group and, being already an integral part, do not need to spend time gaining acceptance. Coming to the fieldwork from a position of 'knowing' rather than that of the stranger (Schutz, 1964) I have the benefit of being able to present an 'empathetic self' (Coffey, 1999). As both the group's instructor and the research instrument I am privileged to be able to see how assumptions about exercise are played out when a newcomer joins the group, interacts with other members and contributes to the shared meanings. For example there is often relief on the part of the newcomer to see that existing members of the group are not dressed in lycra or designer fitness gear. The tenets of participant observation allow me as researcher to distance myself from that which is taken for granted by members of the group. Cohen et al. (2007) comment on the way that meanings are shared by participants

but not necessarily stated explicitly. For example in an ETM class, the way in which the participants arrange themselves and their belongings in the room changes depending upon who is present and the way they interact with me at the beginning of the session changes as relationships form. Also significant is the level of shared esoteric knowledge, linguistic approach to meanings and the discourse used which facilitates the exercise and makes its impact more effective.

A further feature relating to the researcher/exercise instructor which sets this study apart from others of this nature is that as a rule in exercise classes there is often at least a 30 year age gap between exercise instructors and older exercisers, the instructor being the younger. Tulle & Dorrer (2012) remark upon the effects of this discrepancy in terms of aims, discourse and conceptualisation. As I am of similar age to group participants, I am at a point in the life course where I am able to appreciate the effects of ageing upon the body. An age differential has implications for the way that choice of exercise routines are conceived, levels of physiological limitations are understood and presents a lens through which, as the researcher, I can more readily interpret meanings expressed by participants in the study. On the one hand proximity in age between the researcher and the exercise participants may have the effect of enhancing levels of understanding and produces a more accurate picture of people's perceptions. On the contrary the researcher must beware of assuming similarities where none exist on account of this proximity. The tension between strangeness and familiarity is a significant theme in interpreting field notes but should not be viewed as dichotomous. Relations become blurred as the research progresses. As Coffey, (1999: 57) says, 'Ethnographers are not outsiders looking in. They have to be reflective insiders, negotiating roles and subjectivities looking out.' The debate concerning the relative positions of familiarity and strangeness and accounts of fieldwork in familiar settings has been well documented (Delamont, 1992; Hammersley & Atkinson, 1995; Lofland & Lofland, 1995). It is important to avoid feeling too comfortable for fear of losing critical perspective. The key task is to devise strategies to deal with the problem of keeping an ethnographic distance. Constant cross-referencing of data from various sources coupled with reflexive thought and discussion help to address this issue.

Since I lead the group's exercise I have an authority role, responsible for providing safe and effective exercise and, to some extent, am instrumental in the structure and organisation of

the group's activities. My position has already caused me to establish a self-conscious persona aimed at engaging people in exercise. Such impression management on the part of the fieldworker is a task that Hammersley & Atkinson (1995) emphasise as being essential for the facilitation of good fieldwork relations and involves professional and personal characteristics. My established position therefore might be considered a strength facilitating the early stages of the fieldwork. However, it is possible that my role as instructor could have had the effect of setting me apart, distancing me from the study, and during interviews I needed to be aware that there might be attempts to pre-empt outcomes if individuals try to 'help' me by telling me what they thought I wanted to hear. Coffey (1999) argues that the relational necessity of fieldwork produces a contrived situation in which the relationship between falsehood and reality is delicately balanced, particularly at the outset of data collection. Wolcott (2010) highlights the role of participant observation in checking and establishing authenticity. Sufficient circumspection and careful checking of interview transcripts enabled me to test out any concerns on further interview occasions or with participant observation. On the other hand my role means that I have greater facility with the exercise routines and how they are intended to be performed ideally for best effect so my perceptions of the session may differ from those of group members. Observations made during the exercise session have several purposes. For example there may be immediate practical implications if I notice that an exercise participant is having difficulty or might benefit from one-to-one advice in order to gain greater benefit from the exercise or to perform the move more effectively. Other observations are related to facilitating progress, relating to how I might further challenge the group or help them to improve next session. Both of these types of instances relate to my responsibilities and work as an exercise instructor but also form the basis of a narrative in my field journal which, when considered reflexively, promotes understanding and stimulates further enquiry. The key is to maintain a personal and professional identity as the 'essential research instrument' (LeCompte & Preissle, 1993:91) since the identity of the data collector mediates all other identities and roles played by the investigator.

5.8. Sampling

The sample chosen for study is purposive in nature in that it is governed by a single criterion: all the participants are members of the exercise groups that I lead as their

instructor. This excludes all members of other exercise groups to which I am affiliated but do not instruct. I made this decision because I want to explore the significance of the relationship between group members and the instructor in constructing the experience of exercise. Additionally I decided to include all three exercise cultures, ETM, tai chi and Pilates in order to highlight similarities or differences. A variety of exercise settings in the exercise venues such as village halls and youth clubs in a 20 mile radius from my home creates the opportunity to compare groups involved in the same exercise culture. Changes in administrative arrangements spanning the life of the study are also taken into consideration. I aspire to discover how the culture of groups is established and maintained and if there are any common themes related to ageing.

5.9. The sample

The sample broadly comprises members of the 50+ exercise classes I teach. However the level of participant response and involvement in the study was organically driven integrating diverse levels of commitment to providing research data. Practical determinants such as lack of time or availability otherwise militated against interest, desire or willingness to be involved. Everyone was invited to take part as an interviewee or member of a focus group but the practicalities of finding time and place for people to be able to coincide were a determining factor. There is also some fluidity in the shape and size of the sample. This is due to slight changes in membership of the classes over the duration of the study (see Appendix A).

At the beginning of the study all but one of the participant groups were run under the auspices of a local authority adult learning scheme (AL). The one remaining was initiated by the committee of a community centre (CC) which wanted to provide for the needs expressed by members of their local older population. This is an exercise to music (ETM) class. There are substantial differences in how the administrative framework differs. These have an effect on membership of the groups and impact upon the exercise experience. In addition the conceptualisation and consequent way that AL is run has evolved over the life course of participants. Such changes have implications for the meanings that participants attach to AL and how these meanings intersect with their perceptions of exercise. For this reason I include a brief survey of the development of AL. The case study concerns the lived

experience of ageing and exercise of members of all the groups regardless of administrative structure but notes the effects where this is relevant.

5.9.1. A socio-political and historical background to Adult Learning

The current Adult Learning scheme has its roots in the evolution of educational provision for those beyond statutory school age spanning the length of the twentieth century and reflecting socio-political conditions of the time. I draw on the work of Fieldhouse (1996) to create a notion of historical background and evolution. For example the scheme played a major part in supporting the return to work of ex-service men after the Second World War, but was equally a source of practical skills and education and of recreational activities. The advent of the enterprise society led to an increase in the popularity of vocational subjects in the 1980s and the introduction of performance indicators. Such changes in ideology brought changes in terminology. Adult Education became Adult Learning (AL) and those who enrolled in its courses became known as 'learners' as opposed to students. Recreational courses were no longer seen as educational but as leisure. AL courses became aimed at individual self-improvement rather than collective social purpose. The few leisure courses which remain in the twenty first century are treated in the same way as vocational courses. They are framed in terms of targets to be reached at the end of the ten week term. The progress towards the targets is constantly monitored by multiple methods. This process purports to assure quality by providing evidence of progress and is referred to formally as the Individual Learning Plan (ILP). Its existence is justified to learners as a measure of accountability for the subsidy which AL receives from the Learning Skills Council. The last three years (starting in academic year 2013-14) has seen the introduction of the requirement for learners to sign learning agreements at the beginning of every term and to pay an annual registration fee to cover administrative costs in addition to course fees. Extensive formal terms and conditions were published in the back of the AL brochure for the first time in September 2016. These broadly outline the terms of enrolment and the financial conditions which apply. They also indicate financial penalties amounting to almost twice the normal course fee that will be imposed should a learner refuse to sign the learning agreement or to participate in arrangements leading to the production of an ILP (see Appendix B).

If the purpose of recreational/leisure courses was becoming confused, the messages brought by the learning agreements make the situation incomprehensible. Those who enrol for a course paying an initial registration fee on top of the fees for the ten sessions are presented with a double-sided A4 agreement bearing much individual confidential information which they are required to check and sign. Little of this confidential information appears to bear any relevance to an exercise class. The document feels like it is a contract or a bill of sale but it is not clear what the two parties are agreeing to do.

A good number of the participants in my groups have been attending similar AL exercise groups for 30 years or more. Many started in classes that were aimed at adults 18+. Others joined in later life and remark that courses used to be available at discounted rates for people over 50. Otherwise they may not have paid much attention to the changing ideologies which have driven the ever-changing administrative procedures apart from being irritated at the way the outcome of such procedures encroaches on the amount of time available for exercise – which they have paid for – and agreed to do. Nevertheless they stick with their familiar exercise format and the group of friends that has grown up over the years, though they bemoan changed circumstances with increasing frequency.

By comparison the administrative structure of the community exercise group is quite simple. The group was initiated by the committee of a community centre (CC) which wanted to provide for the needs expressed by members of their local older population. I am employed by the community centre and am required to collect £5 per session from each participant who turns up on the night and I leave the money behind the bar to be collected later by a member of the committee. I am paid a flat rate regardless of how many people arrive to exercise. On occasion, because the group is small, my fee may not be covered by the number of people who attend. The committee take the view that they are providing a worthwhile service for local people and are willing to subsidise the group from profits made by the bar should this ever be necessary. The only point of similarity between AL members and those of the community class as regards paperwork is that all participants complete a physical activity readiness questionnaire (PAR-Q) when they enrol for the first time. I discuss this with them and we exchange contact details. This is standard procedure in exercise settings. However AL participants are required to do this at the beginning of each term as their administrative procedures do not recognise continuity of engagement.

5.9.2. Cultures of exercise

Adult Learning scheme classes include classes in exercise to music (ETM), tai chi for health, sometimes referred to as tai chi for arthritis and Pilates. The first of these is aimed exclusively at people in the 50+ age group. ETM sessions consist of a variety of low impact aerobics, stretching and exercises working against resistance. Compared to the other two activities the sessions comprise vigorous activity designed to raise the heart rate. However participants have the option to choose how hard they want to work. Of the three exercise cultures only ETM aspires to raise the heart rate sufficiently to comply with moderately intense exercise as described in CMO guidelines for exercise which enhances health and also provides opportunity for strength training. The other two focus more on breathing, posture and muscle toning which participants find beneficial but which are not specified in CMO guidelines for exercise. There is no age restriction on tai chi or Pilates but they attract predominantly older people possibly because the classes take place in day-time when the majority of adults are at work. Membership is predominantly female. Currently a few men attend tai chi classes. The occasional male has attended the other classes in the past. The noticeable absence of male enrolment in AL classes has been investigated within the county (Gillard, 2012).

The county is essentially rural in character with a few large towns. To provide for such a dispersed population classes take place mainly in village halls in a 20 mile radius of my home. All of these are within the London commuter belt. In economic terms the population is mixed and takes in very wealthy areas as well as areas of deprivation which tend to be grouped around the towns. Occasionally issues of deprivation are addressed by discounting of AL fees for individuals who receive state benefits which applies to a minimal number of participants who have attended my AL classes across the duration of the study. However I also work with a community group where financial support is provided to enable the group's continued existence.

5.10. Ethics

The goal was to produce knowledge without causing harm to the participants involved, without deceiving them and without infringing their privacy (Hammersley and Atkinson, 1995). I was already a member of the field to be studied and the participants had already shown themselves to be willing collaborators in the study. Together we aimed to shape and

determine what was to be understood about them and their situation (Maykut and Morehouse, 1994). These aims were authenticated by gaining approval for the research from the university ethics committee and supported by an information sheet accompanied by an informed consent form for participants (see Appendix A). The information sheet was made available to everyone in the exercise groups and to newcomers who joined after the start of the study but only those who provided verbal content signed the consent form. One individual wished to remain in the exercise group but did not want to take part in the study. Consequently none of her remarks or behaviour is recorded. In addition I ensured the support of others in the organisations that I worked for by making them aware of our activities. I have followed the guidelines provided by the British Sociologists Association in conducting my relationships with participants and other interested parties.

I discussed with those who contributed verbal content whether they wanted to use their own names or pseudonyms. As there was no consensus I attributed pseudonyms to everyone. Hence all the data quoted has been anonymised. I gained participants' permission to audio-record interviews and focus groups and produced transcripts of the recording which I asked them to check. On one occasion an individual chose to delete an item because it implicated a person who was external to the study. Others expanded on their original contributions but most accepted the transcripts as they stood.

My position as instructor gives me access to participants' personal details. I maintain confidentiality over these at all times by keeping contact details in a sealed envelope (following the requirements of my employer) and all other details on a password-protected computer. Though the process of cross-referencing and checking research involves referring to data gained from other participants or sources confidentiality is maintained by anonymising the origins of the data.

5.11. The methods chosen and how they support the study

In order to produce authentic data methods used must parallel ordinary everyday life in the field. Participant observation is the central unifying activity which underpins all other sources of data (Wolcott, 2010). Notes from fieldwork serve to corroborate one another or to reveal discrepancies which can then be explored further. Data from one source can be compared and contrasted with data from a different field setting. Emergent themes from

data can be tested for authenticity by cross-referencing with another individual(s) or another group. This is particularly useful when comparing groups who pursue the same exercise culture such as ETM or when contrasting an ETM group with data from participants of a Pilates or tai chi group. Nevertheless the data remains specific to the group or the individual. It cannot be generalised but serves to show that similarities and differences do occur and may meld to form patterns and a holistic impression can be gained.

5.11.1. Participant observation

As the instrument of the research the instructor is privileged by her position at the front of the class to have a clear view of all participants most of the time and to see how they react to the session. However the action of sharing exercise does not facilitate the depth of conversation necessary to be able to explore perceptions of ageing nor the meanings that participants ascribe to exercise. Opportunities for verbal interaction tend to be restricted to the short periods before and after the class when conversation tends to be purposeful in that it is related to the exercise content of the class. For example participants may want to seek advice about physical conditions that could affect their ability to exercise.

Nevertheless I am always alert at these times to spot and record in my field journal items that could be explored at a later date in more formal interview conditions. Wolcott (2010) remarks on the role that serendipity plays in ethnographic research, echoing Hammersley and Atkinson's (1983) view that ethnography develops organically. For them the process of participant observation employs constant reflexivity and becomes adaptive. Research design is reduced to a statement of purpose which is continually being refined as the work proceeds (Wolcott, 2010). There is no right or wrong to the patterns that emerge, only an avenue towards increased understanding of the circumstances revealed. Much significant information arises from making desirable discoveries by accident. Understanding of the research process also tends to develop backwards. As Wolcott (2001:77) remarks, 'Discovery is our forte'.

Particularly fruitful are the times at the periphery of the class when people chat whilst helping me to prepare or put things away. Ross et al. (2009) highlight how these opportunities of 'being mobile' with a participant can provide insight or can provide openings that can subsequently be followed up in more formal interview settings.

Furthermore the authors found that vulnerable people were more likely to give honest answers when their minds were focused on other activities. In their study of walking for wellbeing and health Hockley and McCormack (2016) comment on how the action of walking side by side together engenders behaviours of reciprocity that encourage sharing and build bonds. Conscious of wishing to obviate the tendency of people telling me what they think I want to hear I have become adept at devising techniques to capitalise on these moments and to record the data in my field journal ready for exploration later.

Borrowing from research methods commonly used in journalism (Ingram and Henshall, 2008) I have adopted the practice of 'vox pops' (the shortened form of vox populi - the voice of the people) which produces short answers which can later be used in a number of different ways. By asking individuals the same question as they arrived at the class it was immediately evident whether there was a consensus of opinion and/or for discrepancies to emerge. Restricting the focus to a single issue also helped me to remember answers and record them in my field journal after the class. Data collected in this way provided the impetus for exploratory work in more formal interview or focus group situations.

5.11.2. Semi-structured interviews and focus groups

Semi-structured interviews and focus groups aim to produce rich, detailed data. By adopting a relaxed and conversational style the investigator's seeks to enable the interviewee to speak as freely as possible about the issues to be explored. Kvale and Brinkmann (2009) describe the interviewer as a traveller who encourages the interviewee or members of the focus group to tell their own story. During the consequent 'journey' in which they articulate their feelings, new knowledge may be produced; a process of reflection may be instigated that furthers understanding or may illuminate values or customs that have previously been taken for granted. Rambling or going off at a tangent is encouraged as it offers insight into what the interviewee sees as relevant and important. Thus the interview can follow the interviewee's interests and concerns and the interviewer can probe interesting areas that arise. In producing a relaxed, more natural atmosphere for conversation the technique avoids the power asymmetry of the formal interview with the creation of a more egalitarian relationship (Kvale and Brinkmann, 2009). Nevertheless the interviewer seeks to guide the interview unobtrusively by preparing an interview guide which can be used to ensure that all intended topics are covered. Identifying a list of topics to explore and using them as

prompts to evoke a naturalistic conversation allows the interviewee to develop topics freely and produces more authentic data (see Appendix C for interview guide).

However interviews and focus groups each possess distinct characteristics. Clearly the one-to-one interview has the advantage for the interviewer of being able to pursue and probe the thoughts of a single person without interruption. By contrast the lively collective interaction engendered in focus groups may bring forth more spontaneous, expressive and emotional views than in an individual interview (Kvale and Brinkmann, 2009). Thus they have the propensity to produce greater variety of detailed data than in a single interview. In the focus group the accent is on interaction within the group; how ideas are introduced and discussed and how a joint construction of meaning emerges. A similar interview guide and similar management strategies can be employed but I was careful not to allow myself to be placed at the head of the table as I did not want to be subconsciously seen as leading the conversation.

However focus groups also have disadvantages in that the intended topics can get hijacked and the researcher may need to intervene as diplomatically and as unobtrusively as possible to bring the conversation back on track or suffer the nightmare of a chaotic transcription. Some people may not wish to share issues of a sensitive nature but might be more forthcoming in a one-to-one situation. There may also be unequal opportunity for individuals to make a contribution for example if the group is dominated by a strong personality. Alternatively there is an additional pressure on the researcher to ensure that everyone gets a chance to speak, especially the more reticent individuals, and to do this in a way that does not prejudice the issue under discussion. For these reasons it is helpful to limit the size of the group to four to six people and to ensure that the venue is not too noisy. Finding a suitable time and place for groups of people to meet for these purposes can also be problematic. Furthermore while focus groups are well-suited to promoting lively debate opinions are open to be influenced during the process but can be checked for reliability by using other methods e.g. vox pop interview.

5.11.3. Other methods

In addition to these well-established methods, I employed a questionnaire consisting of six items that was designed to give me an initial overall impression of participants' current and

former experience of exercise. The overview produced enabled me to map the environment of the inquiry. Questionnaires were completed anonymously. The number of papers returned indicated that the majority of my participants responded. That there were absentees when the questionnaires were distributed may account for the rest.

When I am conducting a class under the auspices of Adult Learning (AL) there are other sources of data that I can draw on. AL institutes a rigid paper trail comprising enrolment details, forms aimed at monitoring progress of learning and of assuring quality of provision, and records of employees' lesson observations and continuous professional development. The comments about the class and the tutor which appear on these monitoring documents provide a further layer of supporting evidence for my findings. When my lessons are observed the observer interviews my participants privately and records examples of their comments on the feedback form which is given to me following the lesson observation, thereby providing an independent lens through which to view the exercise experience and another layer of interpretation. Comments are likely to be positive as participants want the exercise class to continue. However the participants also record their irritation regarding the length of time these paperwork procedures take showing that their comments can be inspired by an emotional reaction. Checking out such comments later by other methods that allow people more time for consideration adds a further level of trustworthiness to the data. Hence much of this evidence provides support for my observations. It can provide openings for further enquiry or offer insight into interview data.

I borrow Wolcott's (2001) terminology and his analogy with a tree to explain how all these methods work together. He groups these research methods under the categories of 'Experiencing, Enquiring, Examining'. The first refers to the experience in the field of gathering and recording data by participant observation. The second refers to the way that further data can be gathered, or can be tested or explored by creating opportunities for interview or focus group. Data can be 'examined' reflexively at any stage of the process and submitted to further enquiry. Finally it is examined analytically in order to draw conclusions. The analogy of the tree shows how the sources of data may intertwine and build strength like the roots of the tree. They help the tree to grow strong and for the branches and leaves to flourish in many directions just as the many stages of reflexivity and data analysis produce ideas and develop various routes that further enhance understanding.

5.12. Data Collection

5.12.1. A springboard into the research

Before embarking upon interviews I felt the need to familiarise myself more with the wider exercise opportunities available for older adults. I knew from my experience as a participant in other keep fit groups that apart from PAR-Q (Physical Activity Readiness Questionnaire) there were differences in structure, administration, provision and working practices of AL exercise classes. As I had come from a very different professional background I felt the need to map the new environment within which I found myself in order to be able to understand better the views and experience of participants and contextualise my study. Consequently I looked at other exercise providers and spoke to managers, instructors and health professionals on an informal basis in order to situate my own practice. The fact that I had earlier pursued training with diverse organisations facilitated these conversations, as I had built up a network of contacts.

I followed this with a similar mapping exercise that gave me an overall impression of the exercise experience background for all of my participants. I did this by constructing a simple six point questionnaire which I asked people to answer. At the time I was instructing six groups. When I gave out the questionnaire there were a few absentees but everyone in attendance took a copy of the questionnaire and most remembered to return it the following week. The questions were as follows:

1. How long have you been coming to this class?
2. What made you decide to join the class?
3. How would you describe this class?
4. What other physical activities do you do (organised, functional, informal, recreational)?
5. What physical activities have you done in the past?
6. How has your choice of physical activity changed?

This data gave me a fuller picture of individuals' exercise experience and helped me to understand and better cater for individual conditions. It gave me an overview of exercise interests and experience of the sample population for my study and provided a springboard for questions in interviews and focus groups. The opportunity to use these initial findings as

the basis for a conference presentation also helped me to develop a deeper understanding of the background to my study and its population (see Appendix D for analysis).

5.12.2. Developing involvement

There was strong interest amongst my participants in the aims of my study. My participants were keen to support me and I had no shortage of volunteers for semi-structured interviews and focus groups. With the permission of participants all of these events were audio-recorded and transcribed. Interviewees were then invited to check the transcript and to add further thoughts or delete items. This gave the possibility of allowing me to access deeper understanding following the assumption that often people want to change or elaborate on their thoughts once they have had time to reflect. Finally the transcripts were reread several times carefully in an attempt to identify emergent themes which could be tested in further interviews within the case study.

However, creating the opportunities for interviews and focus groups was not easy. Practical considerations were fundamental to how these could be executed. The time that suited most people was directly after a class when we could find a suitable venue to settle down and have coffee. I could not do this if I had another class immediately afterwards so the occurrence of first interviews and focus groups was determined by these issues. Flexibility was essential. Focus groups were discretely constituted from members of each exercise group. It would have been very difficult to assemble representatives from several different groups as the group venues are widely dispersed across the south of the county. Besides I felt it would be more worthwhile to try to get an impression from each group and then be able to compare and contrast values and beliefs across groups.

It was with the idea of exploring whether each group had specific characteristics that I decided to start by doing interviews with volunteers from the group that was based in a village where many of the members lived within walking distance of the venue. With this aim and as this was an ETM group it seemed sensible to move on to other ETM groups. After two lengthy interviews I quickly learnt that if I was going to cover the whole range of the groups I worked with I had to find a quicker way of accessing data and so moved towards discrete focus groups. The development a 'vox pops' technique has helped me to check issues quickly on other occasions. Sometimes I pretend that I am a reporter from BBC, that

my dumbbell is a microphone and ask a number of people the same question as they arrive through the door. The drawback of this technique is that I have to remember the responses until I can write them down. On the other hand it has the effect of making me focus precisely on the piece of information I want to know.

Having formed a full picture of ETM classes I realised that I was not going to have time to apply the in-depth time-consuming data collection techniques to my tai chi and Pilates groups. Fortunately there were a few participants of ETM groups who also came to tai chi groups so I was able to explore both cultures of exercise within the same focus group. It was also more difficult to meet with tai chi and Pilates groups after the class because of time and venue constraints but I quickly realised from the answers that I received from my light touch techniques that such in-depth procedures were probably not necessary. I could easily compare and contrast responses from tai chi and Pilates participants with those from ETM participants since it appeared that differences tended to arise from the nature of and preference for the type of exercise. Otherwise participants of all classes shared a common background of living in a similar area and attending an exercise class that was conceived for adults 50+. However Pilates classes were not aimed at a specific age group but at a level of experience: beginners and improvers, but because they took place during the working day the classes tended to attract participants from an older age range. The need to separate out responses from older adults as opposed to those in their 30s and 40s was at the back of my mind when I decided to leave any deeper data collection from Pilates groups towards the end of the research process. The final two interviews were conducted with two individuals who participated in both Pilates and tai chi but not ETM. One of these was with a woman who had recently retired from a very intense professional role. I specifically asked her if I might interview her because over the course of my study I had met with several professional women, some of whom had also recently retired so I wanted to be able to compare and contrast findings.

At the beginning of the inquiry the actual number of interviewees was unknown as the course of ethnographic research cannot be determined. Hammersley and Atkinson (1983: 42) argue 'the process of identifying and defining the case under study must proceed side by side with the refinement of the research problem and the development of the analysis.' The flexible dimension that this provided proved crucial in gathering data effectively and at

times that participants found suitable for them. In the end there were five audio-recorded, semi-structured interviews each lasting between half an hour and an hour. These were subsequently transcribed and participants checked the transcripts for their accuracy as a record of what was said. At this stage they could also add or delete items as they felt necessary. There were five shorter phone interviews which were annotated at the time. Ten focus groups lasting between 20 minutes and an hour were likewise audio-recorded, transcribed and checked. Time was limited in the shorter groups because they occurred immediately before lunch when the members needed to get away to attend to responsibilities at home so the same people met twice in order to cover all the topics. There were also innumerable snippets of conversation recorded 'on the move' (Ross et al. 2009) or summarised in my field journal. It is difficult to be precise about the number of exercise participants whom I have observed in the study or who have contributed to it because of movement in and out of the groups and the changing nature of the groups over the duration of the research. I estimate that the total reaches in the region of one hundred. Of these, 56 people have provided verbal content which I have transcribed.

5.13. Data Analysis

5.13.1. Reflexivity

Reflexivity, defined as an attitude of attending systematically to the context of knowledge construction, especially to the effect of the researcher, at every step of the research process, plays a dominant role in qualitative research and fulfils many purposes (Finlay and Gough, 2003; Sparkes and Smith, 2014). Polkinghorne (1983) argues that in qualitative research the knower is central to the process of gaining knowledge. Furthermore that such knowledge changes self-understanding and relationships with others. Hence reflexivity not only drives development but offers the key to understanding lived experience. This section traces how it plays a significant role in the process of data analysis.

Firstly the process of reflexivity helps social researchers to examine the impact of their own position, perspective and presence in the research. This is exemplified in my exposition of the role of the researcher. Being reflexive promotes rich insight as a result of examining personal responses to data and interpersonal dynamics. I also reflected upon activity from my position as instructor seeking to ensure a safe and effective exercise session. The process

of thinking reflexively on the accumulating series of recorded observations allows salient concepts to emerge which can then be explored more fully. The slow process of data collection and checking assists the growth of familiarity with the data and facilitates the intuitive emergence of themes which cluster around developing concepts before any more formalised methods of analysis begin (Finlay and Gough, 2003; Wolcott, 2001). It was clear from the very beginning that an exercise class involved more than exercise since all interviewees referred to factors that had either stopped them from going back to a class they had tried once or mentioned factors that encouraged them to repeat the experience. Concepts all beginning with the letter 'P' began to emerge. They were predominantly ideas relating to exercise classes being a 'package'; that exercise classes depended upon notions of 'partnership' and that continued attendance at classes involved the experience of 'pleasure'.

5.13.2. Processing the data

Towards the end of data collection all my data, transcripts from interviews and focus groups as well as records from my field journal, were entered onto the qualitative data analysis software package, N Vivo and submitted to a line-by-line coding analysis. The initial coding by this method identified 85 separate nodes or topics. This was intended to be the first exploratory stage in the transitional process between data collection and more extensive data analysis. The next stage would be to refine or condense the nodes, clustering them into more meaningful categories. Charmaz (2006) likens the process to identifying the bones and building them into a skeleton. However, time-consuming technical problems with the operation of the package and inability to access data in this form remotely led me to favour pursuing further themed content analysis by hand on the basis of the work I had already done. Besides I found that line by line analysis fragmented the data and often disrupted the message, as suggested by Charmaz (1995). For example a single message spanning three lines could result in three discrete nodes as a result of being subjected to this process. The effect of counting the total number of lines where a topic was mentioned could skew its significance in relation to the overall content within a single interview. Furthermore quantifying data in this way was not compatible with my intentions to explore lived experience, or with the internal logic of the research (Sparkes and Smith, 2014). On the other hand, Davis and Meyer, (2009) highlight a benefit in manipulating the data in this way

for its ability to create distance between the researcher and the initial process and relationships formed during production in the field. In this way it is possible to take an alternative reflexive perspective akin to the position of 'the stranger' (Schutz, 1964). Nevertheless, for mainly practical reasons I decided to abandon further work on analysis with NVivo and to continue examining the data by hand. Labelling concepts as they appeared in chunks provided a more balanced impression of the content. Welsh (2002), comparing manual and computer-assisted analysis techniques, remarks on the time investment required to make full use of NVivo. She argues that a combination of both manual and computer-assisted methods is likely to achieve the best results.

Coffey (1999) highlights the invidious position of the ethnographic researcher who could be open to criticism for appearing to be narcissistic and indicates the importance of striking a balance between reflexivity and self indulgence. The mixture of mechanical and manual approaches to analysis helps the researcher to avoid this critical dilemma. The importance of questioning field notes and reflexive discussion with my supervisor, acting as a critical friend, helps to ensure that all dimensions of perception are represented so that the eventual report attains authenticity and trustworthiness (Schwandt, 2003).

On reflection I felt more comfortable analysing the data by hand because I felt closer to the context of my data and had a more nuanced appreciation of the circumstances under which it was produced than I had gained from a print-out analysis. Saldaña (2009) argues that coding manually gives the researcher more control and ownership of processing the data. The procedure was similar to that which I had employed when using NVivo but data were only categorised when the thought was complete. Working through the text two or three times in this way I was able to group and regroup initial ideas so that similarities, regularities and differences emerged. Labelling was instrumental in helping me to link categories and to identify consistencies. Following the coding methods advocated by Saldaña (2009), a further examination of these initial codings enabled me to regroup the categories into sub-themes, until salient themes emerged.

In order to see where and how patterns emerged I also coded items for date and origin. Creating a summary sheet for each interview or focus group helped me to identify the major issues that had arisen during each opportunity for discussion and to refer to them quickly

(see Appendix C for examples). In this way comparisons can be made between sources of data produced within the same exercise group; that produced by different groups practising the same exercise culture and that produced in different exercise cultures.

Further opportunities to create reflexive distance from my work were afforded by attendance at conferences. At the first I presented my interim findings, thus opening them up to the reflections of others. At a later stage, when the contents of the 'package' required for an enjoyable and effective exercise session became apparent, another conference provided the opportunity to summarise my findings in poster format (see Appendix D). Apart from being used for conference presentation the poster provided a further talking point for participants and a means of verifying that I had represented their views faithfully. Sparkes and Smith (2014) remark upon how this practice provides a further opportunity to gather data and gain insight. The reflexive processes involved added further weight to Polkinghorne's (1983) contention, that the production of knowledge changes self-understanding and relationships. In this way concepts which may previously have been taken for granted can be illuminated. Furthermore confirmatory comments served to assure me that my analysis was trustworthy and inspired me with confidence to embark on the discussion chapters. In the thesis I aspire to elaborate upon the information contained in the poster; to explain how I arrived at such a summary; to contextualise the findings and to reveal further facets that could not be expressed within such limited confines.

Finally the audit trail which accompanies the study supports its integrity and enables public scrutiny by providing a methodological log of research decisions. The six volume audit trail has proved valuable in enabling me to track back through the stages of my analysis. Seven major themes emerged: Character of the class; Perceptions of age and ageing; Life course effects; Lifestyle and exercise; Enjoyment; Benefits of exercise and Health. The themes confirmed the concepts which had earlier arisen from reflexive thought and discussion; those of partnership, pleasure and the 'package'. All three concepts related to and could be subsumed under the heading of 'Character of the class'. In general all of the other themes contributed to explaining how and why people engaged in the exercise class. They will be discussed first for their ability to respond to the first and second research questions relating to perceptions of ageing and engagement with exercise. Character of the class has an explicatory role in showing how the beliefs, values and experience embodied in the other

themes culminate in the choice of engaging with exercise. Discussed last, this theme reveals how the exercise class is socially constructed and how its existence is maintained. Findings from this theme address the third research question serving to inform policy on exercise provision.

5.14. Trustworthiness

In the case of qualitative research where reality is viewed as mutable (Silverman, 2002) and contingent upon context and on relational, temporal and cultural conditions, there can be no absolute standards for judging the outcome of research. A common way to establish validity in sport, exercise and health is the parallel perspective described by Sparkes (2002). This is rooted in the work of Lincoln and Guba (1985); Guba and Lincoln (1989) who proposed an alternative set of concepts for use in judging qualitative studies. They maintained that credibility can be gained by focusing on the match between the constructed realities of respondents and those realities as represented by the evaluator. Cross-referencing various forms of analysis adds strength to the trustworthiness of the themes which emerge. This form of dependability is further underpinned by a carefully documented audit trail incorporating notes on participant observations and reflexive thought at all stages; thus tracing the trajectory of the study.

However the very act of research constitutes an intervention, introducing to the situation an element which would otherwise not be present. Participant observation attempts to overcome this by integrating the researcher into the culture of the group but has been criticised because in the act of interpretation data must pass through the lens of the researcher's experience. The voices of participants are also mediated via the gaze of their individual fixed circumstances e.g. gender, age, ethnicity (Denzin & Lincoln, 2003). This needs to be taken into consideration at the reporting stage to ensure that all voices are represented. Mantzoukas (2004) goes so far as to warn against silencing the voice of the researcher. Bryman (2001) notes that a further interpretation is added by the reader who adds a further shade of meaning to the study when it is interpreted through his/her own experience. For this reason Bryman (1988) emphasises the importance of including field notes in the final report thereby giving access to a further dimension of understanding (see examples in Appendix C). Wolcott (1994) argues that the possible existence of alternative plausible interpretations is more worthwhile than attempts to establish validity by conventional criteria.

Data arises from the iterative relationship between the researcher and the participants (Sparkes & Smith, 2014; Denzin & Lincoln, 2003) as the lived experience of the people who participate in the exercise classes is gradually explored. Convergence of data from multiple sources and viewpoints produces rich description from which meaning can be interpreted. Richardson (2000) refers to this process as crystallization, in which the writer tells the same story but from different points of view which creates a fuller picture and allows the reader to make up his/her own mind.

Coffey (1999) remarks upon the importance of 'good' field relations, that they contain elements of the personal and the professional, as a way of validating the research. The experience of combining fieldwork with friendship is ambivalent but the quality of the relationship affects the ethnographer's gaze.

Ethnographic research takes account of all these aforementioned positions and seeks to portray social reality as it is perceived by individuals as well as by the group. If we accept that social reality is in a constant state of flux (Silverman, 2000) and that it is filtered through the lenses of differentials such as age, gender, social class and ethnicity (Denzin & Lincoln, 2003), then the type of generalisation and extrapolation of research findings to include larger populations which is associated with quantitative empirical studies appears to have little value here. However, case studies, such as this one, are not intended to be representative of wider populations, nor are their participants chosen at random. The applicability of my findings depend upon the similarity of the subject and context of my study and the extent to which it matches up with key socio-economic factors of any other comparable instance or situation (Denscombe, 1998). When this occurs the implications which may arise from this study become transferable. They can be applied to and tested in those similar contexts and conditions. As Yin (1994) points out, it is the analytic theory produced by qualitative methods which is the important factor. This is because the theory can be used as the basis for stimulating other studies leading to further analysis and the advancement of knowledge.

Barone and Eisner (2012) propose a different kind of generalisability which they call generativity. They argue that the rich, detailed data produced by social inquiry is more akin to an artistic production that is evaluated by identifying appropriate criteria relating to the

characteristics of the specific art form involved. Arts projects have the ability to challenge conceptions of some aspect of the world and so reshape our understanding of them. Hence the effectiveness of a piece of work might be judged on its ability to cast new light on an issue under scrutiny. Sparkes and Smith (2014) quote examples of how this process can effectively be applied to the evaluation of qualitative studies (Sparkes and Douglas, 2007; Carless and Sparkes, 2008) by identifying key traits in the specific study which can be examined and later used as judgement criteria.

This study approaches exercise as a genre of embodied self-expression rather than a competitive form of self-actualisation that can be measured and publicly celebrated. It also attempts to identify characteristics which could be used to inform policy and encourage other older adults to become less sedentary. The qualities sought are related to feelings, values and beliefs. Following the style advocated by Sparkes and Smith (2014) and in addition to evaluation against criteria from a parallel perspective it might therefore be appropriate to judge this work by the extent to which it is able to elaborate characteristics of sensuality, emotionality, kinaesthetic appreciation and overall pleasurable experience; how these relate to values and beliefs; and, more especially, how these characteristics are socially constructed and maintained in the exercise class.

5.15. Summary

The chapter defines what constitutes knowledge and the philosophical basis of reality which underpins it. A positivist paradigm is rejected for its inability to relate to subjective experience or to portray the lifeworld. However, existing knowledge about health and exercise produced by quantitative methods and administrative frameworks which are similarly inspired are acknowledged as having significance for the wider understanding of the data which the study produces.

In an attempt to explore and understand the social order of which we are a part and, in particular, how we perceive the processes of ageing and exercise, I have opted for an interpretive approach so that the outcome of the study should be as comprehensive as possible. The decision follows from the philosophical underpinnings which also direct the choice of methods most likely to produce the knowledge sought. Theory is produced inductively and themes are identified as issues converge. Attention is drawn to the multiple

lenses through which data may be mediated and to the several voices contained in the writing stage of analysis.

The research is conceived as a case study and is, in some respects, unique. However its focus upon ageing and 50+ exercise classes forms an instance of other 50+ activities in AL classes under similar conditions. In this way I hope that the meanings represented here will be able to reach out and have application and benefit to others who find themselves in similar circumstances.

The next four chapters comprise a discussion of the findings from, and analysis of, the data collected. The first focuses on perceptions of ageing and how these perceptions intersect with engagement in exercise; the second looks at ageing and exercise from a life course perspective and the third discusses perceptions of ageing and exercise within the context of experience in current exercise classes. It identifies how participants' values and beliefs about exercise are reflected in their choice of exercise culture. The final chapter discusses how such values and beliefs are played out relationally in the exercise class; how meanings are attributed and how issues of teaching and learning converge to support the social construction of the exercise experience.

Chapter 6: Exercise and the life course

6.1. Introduction

In the last chapter I considered my methodological approach and how I analysed my data. This chapter aims to identify factors which influence the relationship between ageing and exercise across the life course. Townsend et al. (2006) argue that experiences and values formed over the life course shape perceptions in later life. In longitudinal studies Hartman-Stein and Potkanowicz (2003) show that healthy behaviour during the sixth decade of life is a powerful predictor of ageing well in the ninth decade. I draw on the data in this chapter to explore how events and experiences across the life course may have shaped current approaches to engagement with physical activity.

First I explore the participants' experiences of their school days and how these early life antecedents affected later life engagement with physical activity. Next I examine factors affecting the rhythm and pace of participation and the power of life events, time and place to shape changes in engagement. Finally I examine the influence of social discourses, social change and possible cohort effects over the participants' life course and consider how exercise meshes with identity.

6.2. School days

Though statistics from longitudinal studies such as in the example quoted in the introduction above demonstrate the benefits of pursuing an active lifestyle the link between school days' experience of physical activity and engagement in physical activity in later life is under researched. Generally the work conducted is driven by a specific hypothesis. Often a positive correlation is established between positive experience of school sport and continued involvement (Curtis et al. 1999; Bucher, 1974; Howell and McKenzie, 1987; Kelly, 1980; Malina, 1996; White and Curtis, 1990; Yang, 1997), and occasionally a negative correlation (Cardinal et al., 2003). Furthermore, when correlating later participation with positive or negative school experience conceptualisations of the possible range of adulthood tend to be limited. Few reach beyond the age of 60. Not only do some of the data in this case study relate to individuals who are in their ninth decade but no hypothesis is being tested with regard to finding a relationship between school experience of physical activity and current engagement.

Childhood stories polarise between those from people who loved experiences of physical activity at school and those who hated it. People who had enjoyed their school experience sometimes continued with the sports they had learned there e.g. Carmen (63) and netball; Ivy (81), Hortensia (64) and Serena (73) who went on to become keen tennis players. The majority of the rest found other forms of exercise to interest them and especially liked trying out new activities. For example there is Charlotte (64) who took up ballet after school and Brigitte (78) who learned yoga from a master yogi and developed a career in exercise and alternative therapies. Many others have followed fashionable exercise trends e.g. Jane Fonda DVDs, aerobics, Rosemary Conley weightloss classes and more recently, Zumba Gold. Deborah (71) says 'I liked everything with anything movement in' (Tues.ETM FG 28/2/14) and Angie (77) confesses 'I've always done some kind of physical activity'. (Fri.ETM FG 27/3/15).

Whereas Rhona (71) has continued in a similar vein, of trying out new activities, she is an exception to the pattern in that she did not enjoy exercise at school. She values the social dimension to which being good at sports gives access but is disappointed at her own lack of prowess.

I wasn't sporty. I'd love to have been but I was basically pretty useless at all the sports we did at school. I'd like to have been sporty, one of the crowd that could hit the ball when we played tennis but I was never like that (Rhona 71 Mon.ETM Int. 11/3/13).

After leaving school she did her best to rectify the situation so that she could benefit from the social networks associated with tennis.

I went to tennis classes at one stage and I went for a whole term and at the end of the term I could no more hit the ball when I'd finished than when I'd started and I was very disappointed because I was motivated, I wasn't being made to do it at school as you had to and I still couldn't do it. That was disappointing (Rhona, 71 Mon.ETM Int. 11/3/13).

She confessed that she felt 'quite envious of [others] because they could do it and I couldn't do it'. Her feelings reveal complexities in the attractions of physical activity that are not usually cited in relation to practices intended to encourage inactive people to engage with exercise.

Taking into account Cardinal et al. (2013) research, Rhona's tenacity in her determination to pursue an active lifestyle following negative experiences of sport in school is unusual. Rhona does not describe herself as 'an exerciser' but she likes to swim regularly because she loves the smell of chlorine. At the moment she complains of not having the time to fit it in as there is not a pool nearby.

Well, I *don't* go swimming and I *should* and I would enjoy it and for some reason I've just got out of the habit. I'm always determined to start again. If we go to - if we're on holiday and we're in a hotel with a swimming pool I always make a beeline for it. I always make *very* good use of it. But I've just got - maybe, maybe one morning a week doing something is as much as I can fit in regularly perhaps (Rhona, 71 Mon.ETM Int. 11/3/13).

However, she asserts that the most important factor in whatever activity she takes part in is that she should enjoy the activity.

unless you're more sporty than the people I know it's a package all the time. You've got to go for something that you enjoy as well as the exercise (Rhona, 71 Mon.ETM Int. 11/3/13).

The importance of enjoyment is taken up by others who retain unpleasant memories of exercise at school but who have found pleasure in other forms of exercise as an adult. For example Clarissa gave a vivid account of growing up in a Yorkshire mining village where the recollection of having to run round and round an enormous slag heap during cold winter weather was prominent in her mind even today.

We had a slag heap in the middle of our playing field. We used to have to...I come from Yorkshire...we used to have to run round the wretched thing – I hated it, hated it. (Clarissa, 67 Fri.ETM FG 17/10/14).

In adulthood Clarissa has found enjoyment in various forms of aerobics and dance. However she is not alone in associating sport and exercise at school with being cold. Daisy (67) asks 'Why was it always cold?' (Fri.ETM FG 17/10/14) and draws mystification but agreement from the rest of her focus group. Current neighbours and friends who went to the same local school in their youth, Julia (68), Jessie (71) and Carmen(63) recollect the unpleasant experience of being obliged to take communal showers after school sport. They demonstrated the actions they used to avoid the shower and try to convince the teacher that they had already had one.

We used to go like this [demonstrates flicking shoulders] and get our shoulders wet and as we walked out she used to pull our towels to see if the rest of us was wet (Carmen, 63 Thurs.ETM FG 21/3/13).

Carmen (63) loved her netball classes but her feelings were not shared by her friends. When she left school she was keen to continue playing for her company team. For those who disliked the game there was no choice of activity at school and no regrets when they were no longer obliged to pursue the activity. In terms of promoting lifelong sport participation Green (2002) points to the successful effect of broadening the curriculum in school sport over the last 25 years. For the participants of this study sport was determined by the season. They may have experienced a variety of activities but only one at a time. Everyone had to do the same seasonal activity. There were no options. Cardinal et al. (2013) argue that the memory of negative school experiences linked to exercise can destroy the confidence to explore other cultures of sport and exercise later on.

In this case study, though unpleasant memories of physical activity experienced during schooldays draw an emotive response, they do not appear to determine a life long aversion to exercise, if only in the measure that all the interviewees are members of one or two of my exercise classes now. Instead negative experiences may have shaped the way that exercise is conceptualised. Before being involved in a focus group Shelley (79) had not given much thought to what constituted exercise or what it meant to her.

I hated gym at school, probably because I was quite small, right, I hated it, so consequently when I left school and went to work I didn't do any exercise but then, when I got married and I had dogs I walked miles and I presume that's what's kept me fit (Shelley, 79 Tues.ETM FG 28/8/14).

Her reasons for becoming a member of an ETM class were also removed from any meanings rooted in the benefits of physical activity but more to do with staying socially engaged when she became a widow.

Dora (76) asked me. Well...I lost my partner, right? Which meant that I was on my own so we got back together doing things and she said why don't you try keep fit. So I did and I've been doing it ever since - apart from when I had cancer, broke me arm - I've had all - little bits in the middle, yeah. I would like to think it keeps me joints supple (Shelley, 79 Tues.ETM FG 28/8/14).

Her allegiance to the class is now clear. When she injured her ankle she still struggled to get to the class even though she had to walk. She intended to join in by doing everything

seated. Without thinking too much about it exercise was incorporated into her lifestyle in many ways: walking her dogs, housework and she is also an avid gardener who runs the local gardening club. I draw on Wellard's (2014) use of Sartre's (1954) philosophy to explain Shelley's approach to exercise as an adult. Embodied experiences appreciated through the senses are cumulative. Rooted in processes of reflexivity, memories of past enjoyment cannot be separated from current experience and are thus recruited in perpetuating engagement with the group and consequently drives adherence to exercise. She appears not to attribute the same meaning to the experience of exercise that she was obliged to take part in at school and the activities which she has chosen to do as an adult. Yet, like Rhona earlier, she recognises the element of compulsion in school activities and explains her dislike in connection with her stature at the time. Exercise performed under obligation and by choice are both embodied, dynamic processes but the experiences are dislocated as they evoke different emotions.

When exercise is compulsory body-related guilt, shame, pride and envy related to intrapersonal characteristics such as gender, sex and weight status may be implicated (Pila et al. 2016). The embodiment of such self-conscious emotions can be adaptive. For example reparative action can be taken in response to guilt (Bennett et al., 2017). Linked to self compassion, when an individual attempts to be kind to him/herself (Neff, 2003) divergent routes have been identified (Bennett et al. 2017). On the one hand some individuals respond agentically, for example by engaging in exercise to improve the body's status. Others may respond passively by eschewing exercise, taking rest or attempting to conceal the body states that are being experienced. Reactions may also be culturally shaped given that older women have grown up in a period during which exercise was considered inappropriate for females unless it was passive or therapeutic in nature (Vertinsky, 1995). Dionigi (2011) notes that, for older women, leisure activities can be a site of resistance, conformity and empowerment. Furthermore the interplay between these three characteristics varies according to physical activity levels and perceptions of ageing.

Burkitt (2012) argues that emotion is central to the way that people relate to one another and as such is 'woven into the fabric of the interactions we are engaged in' (Burkitt, 2012: 459). For Shelley, in adult life, the regular opportunity to interact with a familiar group of people in a familiar place at a regular time is as strong as the draw of the co-constructed

exercise experience they share. She is proud of her ability to 'keep going' and strongly defends her independence.

Later I explore how time and place affect experience of exercise along the life course but first I investigate how life events beyond school days can shape the pattern and rhythm of participation.

6.3. 'Continuers', 'Rekindlers' and 'Late starters'.

For some participants the break with working life is sufficient to increase engagement with physical activity, to restart activities that have lapsed or to start exercise for the first time. Dionigi (2010; 2015) categorises these groups into 'continuers', 'rekindlers' and 'late starters'. Such participants as Carmen(63), the netball player; Deborah(71), who loves any form of movement; or Angie(77), who has always felt the need to 'do something'; fall into the first category – continuers. The rekindlers fall into two groups which I shall designate 'early' and 'late'. Early rekindlers are people like Clarissa (67) who originally felt the need to get back to exercise when she found she had more time following the alleviation of pressures arising from child rearing.

I think I first started to think about needing to do exercise when I was not so involved with the children. The children were a bit older and I'd started work and it was kind of to compensate for the fact that I *wasn't* rushing around so I think it *was* a conscious decision to do something. I did all sorts (Clarissa, 67 Fri. ETM FG 17/10/14).

Rhona (71) speaks of a similar experience.

Rhona: I think when I had time to join a class. When our younger child started at playgroup there was the chance to do something for myself which I hadn't been able to do for years and going to an exercise class was one of the things which I did. I think it was because I'd reached a stage where I could do something that was for me and not for the children (Rhona, 71 Mon.ETM Int. 11/3/13).

Catherine (66) emphasises that life responsibilities change but that the inability to attend organised exercise classes does not equate to being inactive.

When your children are young you're walking to and from school every day and - or biking, or whatever (Catherine, 66 Mon.ETM FG 27/10/14)

However she concedes

Catherine: I think I *did* have a gap in going to exercise class when the children were younger

Sue: Did you have time to go to exercise class then?

Catherine: Well probably not. Not while the children were at home, you know. Once they went to playgroup or then on to school then there was time to do that sort of thing (Mon.ETM FG 27/10/14).

By contrast 'late rekindlers' are people like Hermia and Charlotte whose jobs became increasingly time-consuming and left them no energy to expend in former pastimes that they had enjoyed.

Hermia: Before I had my children – er - I did quite a lot. I swam regularly and I did - what was called in those days aerobics erm and then I had my children I had twins and through circumstances not necessarily through choice I went back to work very soon after they were born. They were born in March and I was back working in May. Er - so exercise was pretty much at the bottom of the agenda - for quite a while. I then had *another* child after that and again went back to work straight away. So basically I'd worked and, as the job got *bigger* - the time to do anything else got less. So by the time I finished I wasn't even going out for a walk regularly or - doing anything that wasn't work (Hermia, 57 Weds. P & TC Int. 27/5/15).

Both women were horrified by the toll which intense pressure of work had taken on their bodies and both had structured an exercise regime to which they were fully committed on leaving paid employment.

Hermia: Erm - I think at first it was a bit of a necessary evil because I was conscious that by the time I'd finished working – erm - I was probably the least fit person in any group you could imagine. I was likely to be the slowest and most breathless walker. I was the person who found it difficult sometimes, if I'd got to dip down low to pick something up it was a bit of a struggle to get back up again and it just seemed to me that if I didn't do something about it - that was going to get worse not better. My sister does Pilates and is always waxing lyrical about how good it was and I thought, well - it's, it's - it *might* be worth giving it a go and see what happens (Hermia, 57 Weds. P & TC Int. 27/5/15).

Charlotte: I love dance and so it was always, it was usually connected, I love line dancing. I went to my line dancing class *every* week for about 7 years when work really took off and I was not getting home until 7 o' clock at night I couldn't do my dancing . I was sad about that cos I loved the music, I loved the dancing, I loved the whole sort of social side of it (Charlotte, 64 Mon.ETM Int. 6/4/13).

Most 'late starters' were those who were motivated to find new things to do with their time having left the labour market. Sheena joined forces with her next door neighbour who was already retired and together they explored multiple activities to see what they liked doing best.

Sheena: Well, when we first came we used to go to Jung's and have a very expensive cake (laughter) and that was - we'll do that and then we'll go [to ETM]. We only did that for a couple of weeks cos it was so expensive. But no - I've always been quite active so that was a good thing to do (Sheena, 70 Fri.ETM FG 17/10/14).

It was the influence of former school friends who had started up an exercise group at their local community centre that prevailed upon Jessie to join them.

Jessie: The reason that I came is that Julia said to me 'Come to keep fit' I've *never* been to keep fit in all my life and I have to wait till I'm 60-odd to start going to keep fit (Thurs.ETM FG 21/3/13).

This last example stands testimony to the strength of social bonds forged over the life course that remain influential in the co-construction of dynamic relational activity (Gergen, 2009).

6.4. The importance of social interaction

With the obligation for participants to pay for ten sessions upfront exercise classes run by Adult Learning tend to promote social bonds, though it also restricts membership to those who possess sufficient financial resources. People see, and interact with one another regularly and purposefully. Hence a clear social dimension runs through the majority of the examples already cited above. Rhona (71) says exercise is

A means of keeping your body healthy and enjoying what you do (Rhona, 71 Mon.ETM Int. 11/3/13).

She sees enjoyment as an essential by-product of physical activity linked to engaging purposefully in a shared activity with other people. She was originally drawn to trying to improve her skills in tennis in order to benefit from the social life associated with it and this is an aspect which she emphasises in the activities that her friends and family participate in.

thinking of people I know who play golf or my sister-in-law and her tennis or her husband who is a very keen footballer when they mention the tennis or the football or the golf people don't just mention the sport they mention everything that goes with it (Rhona, 71 Mon.ETM Int. 11/3/13).

When she returned to exercise she went to her first class with a friend who shared similar circumstances.

I went with a friend, yes. Yes, our 2 children started at playgroup together and the week they started at the playgroup we started the exercise class in Beaconsfield Rhona, 71 Mon.ETM Int. 11/3/13).

Companionship featured in Catherine's return to exercise when she sought out people who shared something in common beyond the purposes of exercise.

Oh, Well, the social angle was about doing things with other people who had got children the same age (Catherine, 66 Mon.ETM FG 27/10/14).

Sheena (70) mentions looking for pleasurable activities in the company of her next-door neighbour, after retiring from work. When the two of them found the ETM class they quickly made friends with Dorothy (84) who had eventually joined the class by a rather circuitous route but which also involved the quest for social interaction. Following her widowhood Dorothy searched the list of courses available at the local Adult Learning centre.

Dorothy: Well, after I lost my other half I came here for some computer lessons (laughter)

Daisy: And you got in the wrong class

Dorothy: No, no I *did* the - I did go to computer lessons and got to the stage where I could send emails, you know and things like that. I knew just the basic and I'd had enough of that and I decided what was the next thing that I could do that didn't involve - I didn't want to learn languages or anything like that so that's why I came - I was told that they knew you, that you'd started. Some of the people that were already here knew you and they said you were a much better teacher than the one they'd had previously. So that's why I came. To get out of the house, I suppose

Sue: And you stayed

Dorothy: Oh yes. I enjoy this class, yes

Sue: Because?

Dorothy: It's very friendly. Well I enjoy the exercise too. (Fri.ETM FG 17/10/14).

The group later heard that Dorothy had played tennis and golf earlier in her life, had been a strong runner and attended yoga classes. Many of her family members also had a strong sporting tradition but the impetus for rekindling her interest in physical activity was driven by the need to stay socially engaged. Her story echoes that of Shelley, mentioned earlier, whose friend, Dora, encouraged her to join the ETM group when she lost her husband. Their stories also resonate with the narratives of other retirees, and especially widows, who value

their engagement with physical activity as a way of framing their lives, helping them to establish a new routine and fulfilling the need for physical, mental and social engagement.

Support of friends in helping to initiate this process is acknowledged in retrospect as well as the benefits that exercise produces.

because I'd lost my husband, and he'd been ill for a very long time and it had taken up all my time looking after him. When he'd gone I had lots of time on my hands. Moira (67) brought me. I'd probably be one of those people who wouldn't have come on her own. I've never been much of an exercise person I must admit - apart from walking and doing things with kids - but I find that I benefit from it, I do, if I didn't do much gardening I wouldn't do any exercise. It helps with the hip and it does help (Beatrice, 74 Tues.ETM FG. 28/8/14).

The urge to unite socially in purposeful activity is powerfully demonstrated in the community ETM group whose members approached their centre's administrator and asked him to find an exercise teacher who could lead a session for older people. Since the formation of the group the women have been keen to encourage other friends and neighbours to join. Jessie (71) freely admits that she has never undertaken any form of organised exercise and attends this group for the companionship it provides. Yet she is keen to perform all the routines perfectly and takes an interest in which muscles are being exercised.

Jessie: Yeh, yeh. I come for the company, cos I know I'll have a laugh and that exercises my face muscles, doesn't it? See, you don't get wrinkles (laughter) I only have *laughter lines* I don't have a single wrinkle, only laughter lines. Don't we, Dolly?

Dolly: Yes, Jessie. (Laughter) (Thurs.ETM FG 21/3/13).

Absence of a social dimension to exercise is highlighted by Linda's decision to cancel her gym membership because she was bored with the isolated, repetitive activity. She makes similarly critical remarks about the fashion to exercise at home in front of a DVD.

Years ago I used to, before I joined the class, I..I had a video... and I used to dance about to this video in front of the television and...which I quite enjoyed but again it's very solitary and you've got to make yourself do it and it's just the idea of coming out and knowing that this is the time you do it. Otherwise you put it off and you think well I'll do it after that and you don't do it (Linda, 65 Fri.ETM FG 31/10/14).

While discussing the belief that group exercise should be accompanied by, or should generate, social interaction some focus group members started to reminisce about learning

to do ballroom dancing in their youth and the opportunities opened up by the knowledge. At the time they did not consider its position or value as exercise. Dancing was a source of pleasure and an opportunity to interact socially. Now, in retrospect, they recognise how it kept them fit as well.

The next section explores how time and place across the life course have been integral to keeping fit in the way that Shelley (79) and her friends remark upon in the example above. Coupland (2009) argues that current and former identities are portrayed as different and sometimes dissonant. However current selves are formed on the foundation of earlier identities or, as Smith and Sparkes (2008, p.7) say, self and identity are 'constituted via narratives in and through time. Norrick (2009) talks of 'retrospective reassessment' in which a present self may not represent the full identity of that which the narrator constructs. Such evolutionary process also takes account of how technological advancement and social change have displaced exercise from being incorporated into daily life. Instead people are obliged to become proactive in ensuring that they are sufficiently active to maintain health.

6.5. Exercise along the life course mediated by time and place

Tricia who grew up in a Welsh village reflected upon how the availability of transport had determined much of her active behaviour in her younger life.

Tricia: but I used to do exercise. I was quite a sporty girl. And I've always walked a lot - not specifically - but I had to because where I lived with my family I had to, I didn't drive, so we always walked - and as a kid we walked a lot. But then, when I was working I used to go to toning tables and I used to go there 5 nights a week (Tricia, 65 Tues.ETM. FG 28/8/14).

The group went on to discuss how the lack of a car promoted exercise as an integral part of their lives as younger women.

Daisy: No because, I mean, I came from the era where, you know, you walked everywhere and then when I had my...when my children were young I didn't have a car. My exercise was pushing the pram with 3 of them on, one sitting on the front, one hanging on and one sitting on the back. You try pushing the pram..the little pram across the Common with 3 children you know. We didn't think about exercise years ago

Sheena: No, we didn't. Because we walked. We walked our children to school

Daisy: We walked everywhere didn't we? We didn't think anything of it.

Sheena: No, no. We didn't have a car then

Daisy: People didn't go to the gym (Fri.ETM FG 17/10/14).

The technological advances and advent of consumerism that have paralleled the trajectory of their lives have impacted upon the meanings attributed to exercise which has become an activity in its own right. Physical activity as an integral component of daily life has diminished rapidly as the organisation of life has become increasingly mechanised. Changes in the structure of society and how things are done nowadays have changed the whole landscape within which exercise is contextualised and conceived. Instead exercise is perceived to happen in a discrete time and place. The women consider how progress has affected their activities and recall how they reacted as fashionable exercise trends emerged.

Sheena: No, no but then I don't think there wasn't this culture of getting in the car and going somewhere, and sitting at the computer. I mean, life, well, as you say, it was so different because you were active. You know you didn't have the supermarkets, you would go and walk to the shops and back

Daisy: Ye-es. When did the Jane Fonda things come out? Was that kind of when they started fitness videos and things

Sheena: The 70s?

Daisy: Er I got into yoga late 60s. early 70s, when it was considered a cranky thing to do yoga, and then tried it again way down the line but, when you have children you haven't got time for interests you're too busy doing the things, running a home and gardening. It's all exercise isn't it?

Sheena: and if you're working. (Fri.ETM FG 17/10/14).

Others focus on differences in society during their own or their children's childhood which enabled them to play outside and to wander freely through the countryside without parents being worried about the safety of their children.

Dorothy: But even though this is an affluent area children don't play out in the, in the road any more

Daisy: You're quite right

Dorothy: In the close mine used to play outside and also I used to let them go off on their bikes and camp. I mean today you -

Sheena: Yeah, yeah. I mean we used to play out in the road

Daisy: Mine used to just go out in the morning and off in the wood and down the lane (Agreement) I wouldn't do it now. We just used to disappear and then come back to eat

Sheena: Yeah, yeah, we were lucky really. (Fri.ETM FG 17/10/14).

Jessie (71) considers how exercise no longer constitutes an opportunity for free-spirited expression in children's lives. She finds it difficult to understand her daughter's concern that the grandchildren should not play outside unsupervised or that they must not be allowed to walk to school alone.

Sometimes we see children going down our hill on their own and Laura'll say 'Look at that child; she shouldn't be out on her own. She *should* be out on her own. She's every *right* to be out on her own, this little girl, this little boy. It's awful, that my daughter thinks that that child should not be out. She has every right to walk to school (Jessie, 71 Thurs.ETM FG 21/3/13).

She believes that the modern preoccupation with preventing risk drives her daughter to fear what may happen if the children are unattended. Consequently exercise is confined to safe spaces which have been risk-assessed. Other members of the group attempt to justify modern fears about children being out alone despite having to forgo naturally occurring opportunities for exercise.

Yeh but it's just not safe, is it? It's just not safe for kids to play in the streets any more, not like it was when we were kids...You hear such awful things...No, I don't think there was so many awful things... [as when our children were small] (Jemima, 68 Thurs.ETM FG 21/3/13).

Whilst considering how social change had impacted upon the nature of exercise for younger people as well as where and when it was conceived to take place, the women equally bemoaned the effects of spending too much time in front of a computer. Many similar discussions foresaw implications for the health of future generations believing that the youth of today is unlikely to age as well as their own generation.

The changing social landscape and the plethora of meanings now attributed to exercise as a discrete activity are instrumental in forging a discursive link between exercise and health. It is a notion adopted in social policy pertaining to older people, linking engagement with exercise with the 'will to health' (Higgs et al. 2009). It is also a strategy for charging the individual with the responsibility for maintaining health and quality of life. Recognising the link between health promotion and exercise Sheena reflects upon how the pressures of

modern life have been reconceptualised in the media leading to raised awareness of risk and creating fears.

There wasn't, there wasn't, you know, all the media hype. Things have moved on so much now making people aware of diet and keeping fit and if you're living longer you can see people around you as to - you know, something can happen and some people are not so fit (Sheena, 70 Fri.ETM FG 17/10/14).

Revisiting incidents from earlier life and comparing them with current lifestyle allows a re-assessment of both the earlier experience and the current behaviour (Norrick, 2009). A further dimension to the meaning of exercise and health is provided when participants compare themselves to their parents at the same age and reflect upon their parents' lifestyle.

Well, my mother said she used to go swimming a lot but my father didn't mention any sort of sport or physical activity at all. They weren't that sort of people, I mean they were good hard-working working class people. I mean they got their exercise working in their factories and doing things like that. Not much energy left for doing anything that involved getting any more tired than they were already, I think (Rhona, 71 MonETM Int. 11/3/13).

The salient idea was that physical activity was integrated into their parents' lifestyle, both at home and at work. Dolly (80) believed that such a lifestyle contributed to her mother's longevity.

My mum, she died at 80 and she literally walked everywhere. She used to say if I went to do shopping with her I had to walk home [4-5 miles] cos she wouldn't...she wouldn't get on the bus if she could walk. She was very active (Dolly, 80 Thurs.ETM FG 21/3/13).

Participants' current beliefs and values relating to the benefits of exercise for health and longevity will be examined further in the ensuing chapters. Jemma's (72) comment 'Things have changed so much' could be said to summarise how their own engagement with physical activity has changed since school days. It also signals the trajectory of change in the bodies of the participants as they age and the overarching changes in society which have helped to shape such transformations. I now explore how time and place impact upon participants' current experience of exercise and the importance they attribute to intrinsic enjoyment.

6.6. Time, place and enjoyment

Recalling how negative experiences of exercise during childhood were often linked to emotive memories of time and place, for example Clarissa's story of running round the slag heap and others' claim that 'it was always cold', I now examine how enjoyment, too, can be linked emotively to time and place.

Reminiscent of Sparkes' (2007) reference to the gym as a 'sensorium', images of school exercise recollected through the senses remained powerful. Many participants visibly shivered as they recalled the experience. According to Gergen (2009) the memories are shaped dynamically through the actions of the body. Furthermore Gergen emphasises that such embodied action is both situational and relational. The view is supported in multiple ways in the work of Phoenix and Orr (2014) who highlight the ways that people recall their activities in relation, for example, to odours that they find pleasant or to the touch of water against their skin.

In adulthood Rhona (71) referred to the way that when her friends talked about tennis, football or golf their accounts always included contextual details that framed pleasurable experiences. Her own love of swimming evokes memories of holidays, the smell of chlorine which she likes and other accompanying activities at the leisure club which she used to attend regularly before she moved house. That she has been unable to replicate such favourable conditions near her new home contributes to the lapse in her exercise.

when we lived in B. it was wonderful we went to the [named] gym and we belonged to that for, from almost the week that it opened to, almost the day that we left B. We both enjoyed that, we thoroughly enjoyed that and we really miss it. And when we came here we joined the gym in [new location] but we didn't particularly like it. John liked it more than I did but I just didn't like it there. Something about it I didn't enjoy it. It wasn't so well run. At [former gym] we'd enjoy the - there was a little café there and a bar and you could just sit and relax but people could bring their children into the café at [new location], to the bar, and they'd be jumping all over the armchairs. It wasn't relaxing. We went to [former gym] partly for the social side and partly for the exercise. The social side of it was non-existent at the one in [new location]. So to take away half of what you're going to - half of what you're going there for when you're paying a great deal of money, erm, so we gave it up (Rhona, 71 Mon.ETM Int. 11/3/13).

Though her experience and exercise purpose may be different from those of Sparkes (2010) when he refers to the gym as a 'sensorium' the idea of exercise and pleasure being bound

together relationally in time and place has resonance. For Sparkes the sense of pleasure is centred upon the effect of exercise on the body as perceived through the senses. He refers to a satisfying gym session during which he performed a long series of chest presses and describes the intensity of the embodied experience saying 'I *am* my chest' (Sparkes, 2015). For Rhona (71) the experience is socially constructed but nevertheless appreciated through the senses and the belief that she is 'doing some good' to her body.

Many of the participants of ETM classes experience embodied pleasure through moving rhythmically in time to the music.

I like the - and the dancing and I get a buzz from the music (agreement) and prancing about to the music (Cara, 72 Mon.ETM FG 27/10/14).

Enjoyment is also contingent on the type of music.

Linda: The music, the music makes it as well, I think

Sheree (70): Yes, absolutely, *our* sort of music

Linda: It makes you...do this... (gesture) whereas if you were doing it [circuit training] like the men, with no music, then how are you going to get into a rhythm (Fri.ETM FG 31/10/14).

A men's exercise group precedes the Friday morning women's ETM session. A few of the members are married to the women who attend my ETM group. When the current instructor took over the men's group she wanted to use music to accompany the men's exercise but she was soon overruled by the men's preference for silence. Some said that the sound of the music conflicted with their hearing aids and prevented them from hearing the instructions. The wives tell me that the men just did not like the music or found it difficult to follow the beat. However this is not the case in the women's group.

Even those whom I have observed being unable to move in time to the beat say that they love the music and are motivated to move as soon as they hear it.

And also, if you watch the class when the music goes on people start moving – jiggling - even though the class hasn't actually started, you watch people and they're all jiggling around. And I find that fascinating cos I'm doing it as well (giggles) (Helena, 67 Fri.ETM. FG 31/10/14).

Pleasure often extends beyond the limits of time and place of the actual exercise. Many people across all cultures of exercise, ETM, Pilates and tai chi speak about the way that they feel after the class.

And also how it makes you feel afterwards, cos obviously it gets the old endorphins going and then you feel good and therefore you want to repeat that (agreement) There's nothing like feeling. I'm feeling lighter (Daisy, 67 Fri. ETM. FG 17/10/14)

Afterwards I *always* feel more energised. And I always feel that I can go home and do things. I don't feel that I need to sit down and recover, which is nice. So, I think - It makes me feel more positive about the world in general. It gives me more of a sense of perspective on things (Hermia, 57 Weds.Pil. & TC Int. 27/5/15).

Deborah (71) asserts that she's always loved anything that involved movement and has been attending the same ETM classes for over 30 years. Currently awaiting a knee replacement she brings her stick to class and exercises at the back of the room with a chair at hand. Her affiliation to the group is unquestionable.

6.7. Exercise perceived as therapy to offset current effects of ageing

For some participants who have existing medical conditions, the pleasure they gain from exercise is represented by a relief from pain. It is the way that exercise makes them feel afterwards which provides the stimulus for involvement. For example regular exercise for Sheree (70) ensures that she enjoys optimum quality of life. After injuring her spine in a fall two years ago Sheree treats exercise as though it were a medical prescription. She had several types of treatment after the injury but eventually succumbed to the view that the best form of relief from the pain was to keep mobile and come back to her ETM class and to supplement this with other exercise classes throughout the week.

For me it's a priority because it's part of my treatment for the problem I have with my back so - the weeks I don't do it I really feel I've lost something. I don't feel the same. I'm - so it really means a lot to me to join the class and then follow it every - and doing it every week it's sort of discipline for me to come along (Sheree, 70 Fri.ETM FG 31/10/14).

Many participants in my tai chi and Pilates classes subscribe to the same view. Katie (77) takes painkillers to be able to control the pain from her arthritis sufficiently to get her to class because she knows that she will feel better for spending an hour gently mobilising her joints. When Marcia (69) tentatively tried Pilates she was concerned that she would find it too difficult because of stiffness in her shoulders and hips but is amazed at the difference

that the gentle movements have made to her flexibility which, in turn, has enhanced her quality of life.

One of the few male participants, Julian (77), a military man who keeps horses and has been extremely active all his life but who suffers from arthritis, came to tai chi almost by accident because he was considering taking up Italian at the time. He caught sight of the advert for tai chi for arthritis in the same Adult Learning brochure and thought he would give it a try. This is not the only form of exercise he takes to offset the discomfort of arthritis but after attending the class for more than four years now he explains that there are several reasons for him liking tai chi exercise and this class in particular. There are unexpected bonuses. Tai chi makes him concentrate; he likes the people; he relaxes and he feels mentally better after he has been to class.

It gives me a lift. It blocks out all the mundane troubles of life that we all have. My wife says that when I get home I'm much more sunny - better to live with (Julian 77 Int. 3/12/16).

Other members of tai chi and Pilates classes who do not have prior painful health conditions say that they experience similar stress-busting effects from their exercise sessions. Many say that they feel calmer and sleep better.

Julian is not looking forward to having a hip replacement which he refers to as an 'embuggerance', not because he is worried about the operation as he has already experienced a similar operation on the other hip, but because he will miss his tai chi exercise, its effects and contact with the group. The wellbeing which it promotes is relational and involves both time and place (Atkinson, 2013). In this respect the nature of wellbeing underscores Rhona's testimony that exercise has multifaceted effects. Given that outcomes of exercise have been linked to promoting wellbeing, which has also been described as multi-faceted (Atkinson, 2013) this complex nature of exercise is under-researched.

The testimony of participants such as Sheree (70), Julian (77) and Katie (77) demonstrates a certain vigour in confronting the pain. Seeman et al. (1990) contend that this sort of behaviour demonstrates self-efficacy where the strength of belief in the result of taking action drives the will to take the action. All three have tried other methods and supplement

their weekly hour of tai chi with other forms of exercise. Katie admits that it would be much easier to succumb to the discomfort rather than going through the pain barrier to free up her joints but she believes that the outcome of doing so in the long term would be to become gradually more and more stiff and incapable of doing anything.

For Helena, a retired medical administrator, taking such a course of action seems an obvious thing to do. Yet it is difficult to empathise with this dilemma if one has not experienced it oneself and the medical route leans heavily towards the positivist which takes a utilitarian view of the condition rather than situating the problem within the lived experience of the individual. In other words it is a reductionist view of the link between exercise and wellbeing. Helena expressed the belief that in an ageing population more people should be encouraged by their doctors to take up a responsible course of action with regard to exercise. She comments on her perceptions of patients' expectations.

I think GPs when they get the older person coming in - They've got a massive, huge problem - emotional problem, social problem. I think a GP needs to start offering exercise classes that's what I genuinely believe because I think a lot of problems is - people go to the GP - you give me a box of tablets and I'll get better. Life is not like that any more (Helena, 67 Fri.ETM FG 20/3/15).

Coming from a background in medical administration Helena realises that time restrictions on appointments and the way that the health service is structured at the moment do not facilitate a more caring response. It appears that time-limited consultations have the effect of focusing patient attention towards receiving an instant remedy to their problem in the form of medication. Helena believes that there may be better courses of action as she thinks that many patients would benefit more from an opportunity to talk through their problems or being directed towards some other form of therapy. Nevertheless her views situate exercise within the prescriptive category that Tulle (2008a) warns against, as a panacea for the perceived problems of ageing. Her view resonates with that of Higgs et al. (2009) who argue that exercise is conceived as a required component of the 'will to health' where the onus is on the individual to behave dutifully and responsibly in the quest to preserve health.

Drawing on the testimony of the participants in the study there is much missing from this conceptualisation. Even Chantal (66) who says that the two hours per week she spends swimming in lanes is a discipline, a duty performed to protect her long-term health, asserts

that exercise impacts upon life in dimensions that reach beyond her physiological state. She says that exercise is 'not quite enjoyment - something approaching it' (Chantal, Weds.Pil. FJ 5/8/13) but cannot find a precise word for how she feels about it. Angie (77) describes exercise as 'more than satisfaction' (Angie, 77 Fri.ETM FJ 24/8/15). Others emphasise unexpected effects of exercise that they consider to be a bonus e.g. being able to sleep better, feeling less stressed, breathing more easily and the social interaction and sense of belonging to the group which ensues from it. Many also cite enjoyment as quintessential to the experience.

In the last section of this chapter I consider how the changing, and sometimes conflicting, meanings attached to exercise intersect in an expression of what today might be considered to represent 'an active life' for older adults.

6.8. What is a twenty-first century 'Active Life' for older adults?

The first and most evident answer for participants in the study is that an active life incorporates regular, organised exercise. For many this entails other forms of exercise beyond that which they perform in my classes. For some there is an implied sense of urgency to continue to exercise for as long as possible driven by a fear of what might happen if they stop. Clarissa (67) highlights how the media plays a part in fuelling such fears.

The media's full of the horror stories about care...the elderly (agreement). There isn't much about what the elderly are *doing* (agreement) but it's the really negative, sad side of old age (agreement) that we hear a lot about (Clarissa, 67 Fri.ETM FG 17/10/14).

Nevertheless Brigitte (78) maintains that staying active is essential for healthy ageing regardless of whether current efforts are acknowledged in the press or not.

You can't stop because then you never get going again (Brigitte, 78 Fri.ETM FG 31/10/14).

Norricks (2009) acknowledges such age-related fears and competencies and Coupland's (2009) work demonstrates how such fears are fuelled by all media platforms which emphasise the need to keep up appearances.

Sheree (70) testifies to the difficulty of getting back into exercise following a holiday but that the loss of flexibility that she experiences as a result of the break spurs her on because

she fears any further depreciation in her physical state. She says that since she has retired keep fit has become part of her way of life.

I have to have regular exercise and stay active. If I don't stay active, all the things I have always enjoyed and taken for granted may start to become that little bit harder (Sheree, Fri.ETM Int. 5/12/14).

Angie agrees and emphasises the need to find activities that suit her current age and ability. For her it is important that there should be some sort of exercise in her life.

Angie: Well for me I think it's something I need to do. I know that from being a young mum I've always done some kind of physical activity. I know it's only once a week but I know that I have to do something. I wouldn't feel right if I didn't. At times it's been yoga and musical movement, vigorous keep fit, step classes and things to suit your age (Fri.ETM FG 27/3/15).

In contrast to her exhortation not to stop Brigitte (78) adds that her reason for giving up teaching yoga was the loss of friends as people grew older and became infirm. She still performs her own daily yoga but found it depressing to observe in her yoga class how people's capabilities diminished rapidly beyond the age of 75.

But then we all got so *old*, in the class, all in our 70s and 80s that I thought I think I'll have to draw it to a close. Otherwise there'll be just one last man standing and it'll be me, so I - no but I loved, I loved the yoga (Brigitte, 78 Fri.ETM FG 27/3/15).

Conversely she marvels at how some of her friends never appear to take much exercise but seem to enjoy perfectly good health. It is an observation echoed by Rhona (71) on another occasion. Rhona (71) remarks how some of her friends eschew a regular weekly commitment in favour of being available to fit in with other people's activities.

Rhona: Most of the women I know of my own age don't exercise regularly, in any way regularly, except my sister-in-law and she's very sporty. Other than that, nobody that I know, that I'm particularly friendly with goes to a keep fit class or swims regularly or anything. They used to but they've all given up.

Sue: Why do you think that is?

Rhona: I think often it's when the women's husbands retire they're too busy to do it – too busy doing other things.

Sue: It's not that they don't enjoy it any more?

Rhona: No, no. They just don't want to commit themselves to doing anything regularly. (Mon.ETM Int. 11/3/13).

I draw on the work of Quéniart and Charpentier (2012) to explain this attitude. They found that the older women in their study lived more in the here and now. They described time as 'increasingly porous and less structured by obligations' (p.997). This is an alternative example of how people co-construct their activities in relation to one another (Gergen, 2009). As people come together in the group exercise class experience is co-constructed in accordance with the desires, needs and abilities of the members of the class. The 'other activities' which Rhona's friends are busy doing imply that her friends are still very active but no longer have time to pursue exercise in the organised manner that they did formerly.

This is an evolution which I have observed first hand as some of the participants who had recently retired when they first came to my classes adjust to their new status in life. Since I first interviewed Charlotte (64) and Hermia (57) two to three years have now elapsed and both have habituated to retirement, have wrought their desired physical improvement and now orient their exercise towards maintenance rather than improvement. Charlotte ceased coming to my class first when she trained to be an exercise instructor for older people herself. Hermia, who originally complained of a loss of identity and of being appalled by the state of her body on retirement, left the exercise classes last Christmas and wrote in her Christmas card 'Thank you for getting me started'. She is now heavily involved with family commitments and has joined the 50+ class at the local leisure centre because it offers her more flexibility over time commitments. Initially she had eschewed the idea of joining a local public facility for fear of meeting people who knew her in her former role from which she had withdrawn voluntarily and wanted to quit entirely. The focus on exercise as a transitional activity has shifted and become integrated into lifestyle in a more nuanced way following the renegotiation of identity.

Coupland (2009) asks whether we are the same people as we were earlier in our lives. Withdrawal from the paid labour market shapes how identity is expressed in relation to changed roles and activities. Based upon the notion of identity being a continuously flowing stream (Laz, 2003) always in a state of 'becoming' or that the body is an unfinished project (Shilling, 1993) the answer to Coupland's question would appear to be 'maybe' or, at least, 'to some extent'. Freedom from the imposed routines and duties of a work schedule provides time to renegotiate identity and revisit earlier modes of expression, especially if they were remembered as pleasurable experiences. It also provides new opportunities and

challenges. Atchley (1993) theorises that the essential is to promote some form of continuity at the same time as adjusting to change. Participants' experience also reveals that it is also important to find a way of coping with social discourses and accepted stereotypes. I have shown that organised exercise positioned at the point of transition can fulfil many purposes. It provides a focus for social interaction and alleviates loneliness (Bidonde, 2009). It fills the lacuna caused by loss of role, as in retirement, or loss of partner, as in widowhood. Its ability to foster a sense of achievement allows it to provide a safety net to counteract the sense of loss which buoys up and enhances self esteem (Ekerdt and Koss, 2015; Nimrod, 2007). It is beneficial to health and can be a strategy for coping with pain or injury. Specht et al. (2014) have shown in a comparative study conducted in Germany and Australia that personality can change by up to 25% across the life course. Generally people become happier and more relaxed the older they grow. Using statistics from SHARE, Austria (2013) Kolland (2016) demonstrates that though control may diminish slightly, a sense of autonomy increases and the power to choose how one spends one's time creates a far more stress free existence. I argue that the most effective exercise should fit into this framework. For this to be so engagement should be inspired by notions of enjoyment and satisfaction. Drivers such as duty and discipline both imply stress.

6.9. Summary

The purpose of this chapter was to explore how experiences of physical activity along the life course shape meanings of, and attitudes to, exercise in later life. I attempt to make the landscape as wide as possible by framing engagement within the dimensions of comparative generational experience. I also avoid restricting such experience to personal involvement by taking account of wider social issues and social change in relation to common but major life events.

One of the effects of doing this is to reveal how exercise can be viewed along a continuum ranging from that which is essential for functioning in life to cultures of exercise performed for a multiplicity of extrinsic reasons allied to leisure and challenge. Performing exercise to gain a health benefit appears to have a shifting position along this continuum depending upon individual circumstances.

The feature which unites the exercise experience of participants in this study is that all the participants have chosen to take part in a form of organised exercise. Their reasons for doing so have been demonstrated to be diverse but their choice of, and adherence to their chosen class appears to be accompanied by pleasurable or satisfying outcomes. Even those whose expressed purpose when they originally joined the group appeared to be discrete and precisely targeted, for example to cope with pain, or intention, for example to get fit again, confess to experiencing unexpected gains which encourage them to continue.

This chapter has traced how engagement with exercise interacts with ageing across the life course. The data shows how school experience of exercise may have the ability to lay down meanings through which exercise is interpreted in adult life and the role of the senses in laying down those memories. I have explored the context in which the memories were formed and their relationship to time, place and interaction with other people. I further explored social effects; the environment in which participants grew up and how events in the wider world impinged upon memories of childhood and exercise. In adult life I showed how the growth of a leisure industry was reflected in fashionable trends for exercise and how individuals responded to these trends. Ultimately I considered how life course responsibilities such as child rearing, familial duties, increasing pressure of work and coping with the transition to retirement, other life-changing events and burgeoning health conditions constituted major drivers of lifestyle change and identity renegotiation that intersected with engagement with physical activity. The interface between discourse and identity is central to determining how individuals engage with exercise and is inseparable from such issues as culture, class, race and gender.

The chapter is intended to create a broad picture of the lived experience which led up to participants' enrolment in their current exercise groups. It contributes to setting the scene for Chapter Nine in which I investigate further what motivates them to stay. That some measure of enjoyment or satisfaction is allied to the benefits of exercise emerges as a central tenet from the testimonies that I have collected in my study.

The next chapter explores more closely how ageing is perceived and how the processes of ageing relate to exercise.

Chapter Seven: Perceptions of ageing and exercise

7.1. Introduction

In the last chapter I considered the sources of experience across the life course which may have had an influence on shaping current attitudes and engagement to exercise amongst my participants. This chapter deals with perceptions of the ageing self in the context of society. First I delineate an overall indication of how ageing and the self were perceived and relate these perceptions to common discourses and to theories of the ageing self; of the continuity and renegotiation of identity and of theories of masking and masquerade. The final section focuses on how identity and the ageing body are perceived in relation to the exercise class.

7.2. Mediators of the ageing self and society

The dominant theme about ageing that emerges from the data is one of acceptance: that ageing is a process synonymous with life, as Angie (77) says

....I never think about my age....I'm just me. I feel the same as ever inside. It's just other people that see the outside (Angie, 77, Fri. ETM Int. 4/7/14).

Her view suggests that the process of ageing is relational. An individual's ageing is perceived by others but not always by oneself. Jullien (2011) writes of the silent transformations which are not immediately evident to the individual but which have the capacity to shock on occasion when suddenly or unexpectedly confronted by an image of self that appears alien. His argument is supported by the findings of work with women in their 50s during the process of habituating to the physiological signs of ageing (Ballard et al. 2005). Biggs (1993; 1997) suggests that changes in physical appearance serve as prompts for individuals to identify with the ageing body and to reconsider personal identity. Angie's view resonates with that of Hockey and James (2003) who argue that ageing is a dynamic process which flows like a stream. The progress of change is imperceptible and thus has the capacity to pass unnoticed. Laz (2003) echoes the metaphor of self as a constantly flowing stream. She likens its dynamic constancy to the self which, for Shilling (1993), is always in a state of 'becoming'.

This dynamism is reflected in Sheena's (70) view that she is too busy to think about being old.

I mean I know I should, but I don't think of myself as old (laughter) I mean I know ...but unless something happens I don't think about it...(Sheena 70, Fri. ETM FG 17/10/14).

The unexpected event that Sheena refers to equates to the jolt identified by Jullien that awakens the individual to the effects of the silent passage of time on the body. People who mention similar incidents which remind them of the passage of time perceive the incidents as external to the self. For example Linda (68) was only reminded of her age when she had an accident which caused her to break her arm. Normally she only sees change in her grandchildren but does not notice it in herself and is mildly surprised when she quotes her chronological age. Retirement from the labour market provided the jolt that caused Charlotte (64) and Hermia (57) to reflect on the state of their bodies and to realise that they were no longer as fit as they thought they were.

For Tricia (65) there is no jolt but her thoughts suggest that the transformations are silent and embodied.

Aches and pains is the only thing that makes you think you're getting old. Mentally, I don't think about it. The trick is to mentally picture and strengthen the muscles. (Tricia, 65 Tues. ETM FG 16/10/14).

In similar vein it is only when Daisy's knee starts 'playing up' that she associates the pain with her age. The views reflect the feeling that the body is an 'absent presence' (Oberg, 1995) whose familiarity (Frank, 1991) normally does not stimulate the owner's attention. On the contrary receding energy levels are accepted and managed. Angie (77), who is heavily involved in supporting others in the community and upholds this busy approach to life, owned that it is important to pace yourself as you get older and adjust to your changing energy capacity.

I think things do take longer all the things that you're doing. You have to allow longer to do them (Angie, 77, Fri. ETM FG 22/3/15).

Her thoughts echo Shilling's view, (1993) that the body is a project, unfinished and always in a state of flux. Shilling argues that the self and the body may vary in their rate of change but the two are forever linked. Angie's (77) acceptance of change, ability to listen to her body and manage fluctuating energy levels is reflected in an apology for her absence from the ETM class.

I was all ready to come to class last Friday – weights and water in a bag and I thought ‘No’ – been in all day Thursday – just tired, body catches up with you – needed to rest. OK now. Off to York for a few days tomorrow. Sister says you have to listen to your body. (Angie, 77, Fri. ETM Int. 3/11/14).

Linda’s (68) comments on the need to manage fluctuating energy levels also underline the dynamic quality of ageing.

....some days you feel better than others, don’t you. You know, some days you feel more energetic (Linda, 68, Fri. ETM FG 31/10/14).

Participants demonstrate agency in accepting and managing the effects of age-related change on the body. However as many authors have demonstrated (Grant and Kluge, 2007; Phoenix & Sparkes, 2006; McCarthy & Stone, 2015; Bultena & Powers, 1978; Jones, 2006; Bowling et al., 2005; Dovey, 2015) perceptions of age are socially constructed. Chronological age provides a marker of external events e.g. birthdays which end in zero or retirement from the paid labour market, against which perceptions can be symbolically judged. Nevertheless perceptions relate to individual actors and vary within the context that action takes place as I will show below.

7.3. Age is relative

Carmen (63) spoke of feeling younger now in the context of her ETM group where all the participants are in their 60s than she did in her late 30s when she was playing netball competitively. ‘They was all youngsters’ she said, whom, she felt, did not understand her need to recover between matches played consecutively on the same day. She felt that she was under added pressure because her seniority meant that she was called upon to umpire matches in which she was not a team member. Her dual role produced conflict in the way that she thought of herself. She liked the responsibility placed upon her and the respect that the role of umpire brought but she wanted to play for her team as well. The amount of energy required to do both compromised her effectiveness. She measured herself reflexively against those around her and Instead of being able to concentrate on the feelings of youthfulness conveyed by playing sport alongside ‘youngsters’ she felt marginalised by her perceived greater age.

And being as I was small. I used to play wing attack but if the centre was..if she wasn’t there that day they used to try and get me to do centre cos I was nippy -

Yeh - And at the end of an hour...there was lots of youngsters coming through and I was feelin a bitold (Carmen, 63 Thurs. ETM FG 21/3/13).

Participants of Carmen's ETM group meet in a community centre where they also meet for coffee in the morning and come to ETM in the evening. In my field journal I noted how one evening I was met by their fury resulting from a visit to their coffee morning of a representative from the local authority that day. They were annoyed because the representative had attempted to persuade them to engage in exercise or to increase their existing levels of engagement. They felt virtuous because they were already members of their own community centre older adults' exercise group. But what really incensed them was that the council representative was inviting them to join a class which met in a sheltered accommodation complex.

'They're all old uns down there.....not like us' (Thurs.ETM, FJ 10/1/13).

There is a discrepancy between the meanings they attach to their own ageing and those which they attribute to the residents of the housing complex. The accommodation in question takes in residents from the age of 55. Perceptions appeared to be grounded in the assumption that residents of a sheltered accommodation complex would be different regardless of whether they were of a similar age. All the participants of my ETM group are owner-occupiers and see sheltered accommodation as provision for those who are unable to live independently. An underlying sense of fear was implied.

'not goin' down there yet'

' hope never to have to'

The fears were unarticulated but also suggested social judgements associated with being residents of sheltered accommodation that they did not want to be obliged to experience themselves. The sentiments expressed reflect perceptions of peers highlighted in the work of Townsend et al. (2006) where older female adults tend to categorise their peers as 'heroines, villains and victims' (p.883) depending upon how well they are perceived to be coping with the ageing process. The heroines are those who are doing well and exceeding the stereotypes of decline. The villains evoked censure for having given up, refusing help or for taking without giving back. The victims of old age are primarily those suffering from dementia, who were perceived as needing to be looked after and who evoked pity or

concern. The study illuminates how conceptions of old age relate to people's self-identity and management of the ageing process. Contrasting images of older people were categorised as 'those like us' and 'others'. Though the two groups have never met members of the ETM group perceived residents of the sheltered accommodation to be 'others' based upon negative assumptions about old age evoked by their living circumstances.

Other studies have documented the distancing processes that older adults often use to distinguish between themselves and others whom they deem to be 'old' (Hurd, 1999; Jones, 2006; Lund and Engelsrud, 2008; Rozario and Derienzis, 2009). This process of 'othering' enables individuals to evaluate their own rate of 'ageing well'. Such a position alludes to the categorisation of older people into the 'third age' elderly, who are active and healthy, and the 'fourth age' elderly who are regarded as frail and in decline (Higgs and Gilleard, 2015). By distancing themselves from people who do not share similar situations or characteristics they are able to protect their own self-identity. Jemma (72) expressed impatience with peers whom she felt were 'ageing badly' or who appeared not to share her 'frame of mind' with regard to ageing and wished to dissociate herself from them

Sometimes when I'm with people of my age I think....`hmpf, for goodness sake, woman, you know' (laughter) I get quite impatient. (Mon.ETM FG 23/3/15).

The example above shows how the process of 'othering' can be internalised. Other members of her focus group feared being 'herded together' as retirees and the loss of self-identity and independence that that implied. It is as though movement into a communal facility, rather than fostering a sense of belonging to a community, might cause disruption to the continuity of the self (Biggs, 2004) by way of removal from society and hence provoke feelings of isolation.

Jemma (72) But It's very easy to be... cynical about it but if you've got other ages around you you do tend to see other people's points of view, I think, I wouldn't want to be surrounded by old people (Mon.ETM FG 23/3/15).

Paradoxically they value the sense of belonging engendered in the structured homogeneity of their 50+ keep fit class followed by meetings in the coffee shop.

Though they saw that there might be advantages in communal living their fears centred upon a deficit model of ageing which such complexes suggested to them. Yet otherwise such fears remain absent from their expressed activities. Angie's original comment that she

does not feel old, but that other people might see her as old, shows particular insight in this context. Discourses attached to the contexts in which older people operate appear to be influential in shaping perceptions of ageing.

For Jemma behaviour and attitude are also important features. She sees herself as a busy person and resists discourses which imply that retirement should be a time of rest and relaxation.

I am definitely, definitely...a person who needs to be busy...definitely. And I still rush around exactly like I did when I was at work. Even though I've got all week to do something in I still rush around to get it done. It's just...I've always done it! Can't get rid of that (Jemma, 72 Mon.ETM FG 27/10/14).

Clarissa (67), member of a different ETM group also values an active life but she understands that the attitude of wanting to enjoy rest and relaxation may be linked to character or to earlier experience

Clarissa (67) It comes back to your attitude (Yeh) People who...my mother lives with us.....she is happy to be looked after...and ... having been married 60 years when my father died...she didn't go out cos that's not in her nature. She's never done that.... but she could do so much more...but it's not in her nature (Clarissa, 67 Fri.ETM,FG 17/10/14).

Clarissa's self-identity expressed through her agentic choice of lifestyle reflects Laz's (1998) view that you can 'act your age' by choosing how to 'perform' it. Other members of her group enjoined with narratives which illuminate how the reflexive dimension involved in creating an image of the self (Mead, 1934) is allied to comparative and relational functions. Clarissa wants to pursue an active lifestyle which is quite different from that of her mother's but Sheena's friend looks upon Sheena as a role model for her own future retirement.

Sheena (70) I mean I walk with a friend on a Wednesday who's 54 and she always says to me, you know, when I retire I hope to be like you – always be busy – and I think that's really the right thing to say (Sheena, 70 Fri.ETM, FG 17/10/14).

Yet impressions of age can change. When Angie (77) first joined the class In her 50s (before I was their instructor) approximately 25 years ago, it was because she decided that she was getting old and wanted to take steps to maintain functional mobility for as long as possible. She reflects:

When I started in my 50s I was the only person in my 50s and we thought we were old but 50 isn't old – it depends upon the person – lots of people in the group are now in their 80s (Angie, 77 Fri. ETM Int. 3/11/14).

In addition to recognising changes in energy levels the reflection demonstrates how her interpretation of 'old' has changed as she has grown older herself.

So far I have discussed how the identity of the ageing self is shaped by subjective and reflexive conditions and in comparison with social attitudes and behaviour. I now turn to a more literal interpretation of Angie's comment: 'It's just other people that see the outside' (Angie, 77, Fri. ETM Int. 4/7/14).

7.4. Image and the social construction of the self

In this section I discuss how values placed on appearance intersect with identity and self image. A popular motif in gerontological discourse is the concept of the 'Mask of Ageing' (Featherstone and Hepworth, 1989, 1991) and associated theories of masquerade that deal with attempts to conceal or disguise the outward effects of ageing. The image of the mask symbolises a tension between the external signs of ageing e.g. grey hair and wrinkles, and an essentially youthful self-image which remains trapped inside. According to Featherstone and Hepworth the mask refers to what Angie says 'other people' see. For her the mask is merely an object and not part of her subjective identity. The body is perceived subjectively by the individual but objectively when reflected through the lens of others (Cooley, 1902; Bytheway, 2000; Biggs, 2004). Angie is aware that she might be judged by the outward and visible signs of ageing that others see but her confidence in her own identity drives her to confront, negotiate and manage the issues which accompany ageing e.g. decreasing stamina, fluctuating energy levels.

One of the things about getting older is not getting frustrated ... Accepting your age is ... One of the difficult things not having the stamina and... accepting that I've got even less it's very difficultyou've just got to do what you can (Angie, 77, Fri. ETM FG 22/3/15).

She is also confident of her multiple roles in life and demonstrates a clear sense of purpose in the voluntary activities that she undertakes for church and community groups.

Appearance, beyond the scope of 'what other people see', is not one of the issues she discusses further. The observer can see that Angie is always neatly turned out and, like many of the women in her ETM group, clad in loose-fitting, age-appropriate clothes that are

suitable for exercise but in which she also feels comfortable when doing her shopping on the way home. It is plain from her hairstyle and discreet use of make-up to enhance her features that presenting an appropriate public image is something that she cares about. Her words and her actions suggest that she accepts and owns the 'mask' of ageing as described by Featherstone and Hepworth (1991) i.e. visible signs which cannot be removed, but refuses to let it deter her from expressing the self image that she chooses to project. Her sense of agency demonstrates that maybe the mask cannot be removed but it does not operate to conceal the essentially youthful self beneath. She is not trapped by it.

Featherstone and Hepworth's theory (1991) attempts to explain how social discourses tend to prize youthfulness (Andrews, 1999) but it does not excuse society from stigmatizing a large proportion of the population. Drawing on the metaphor of stigma (Goffman, 1963) people who are seen as different are obliged to make special efforts to gain acceptance by society so those who are no longer youthful must employ compensatory strategies. Theories of masquerade argue that the process of masquerade arbitrates between the inner youthful self-identity and the outer ageing body. Hortensia (64) provides evidence of this technique demonstrated by some of her friends who have daughters but contends that she eschews the process herself.

...I've got one or two friends who try to look...you know because they've got daughters and they try to keep up with their daughters and they look ...they're wearing skirts that are too short ...and you think...you know...erm ..it's not good,...you can make yourself look very silly, actually. You need to age appropriately with your dress code... (Hortensia, 64, Mon.ETM FG 23/3/15).

For Woodward (1991) the attempted dissimulation of masquerade both conceals and reveals the marks of age emphasising the power of the cult of youth. The conceptual frame of masquerade provides a mechanism for dealing with those parts of the self that have to be suppressed or protected from the assault of an ageist environment. It would seem from Hortensia's comments that her friends are unaware of the impression their choice of clothes makes on others or at least may be misinterpreting it. From Hortensia's point of view they are revealing instead of seeking to protect and suppress. Biggs (2004) contends that masquerade is a coping strategy aimed at keeping one's options open, 'a device through which an active agent looks out at, and negotiates with the world, leaving the viewer to unravel fact from fiction' (Biggs, 2004, 53). As in the example quoted above its effectiveness

may be limited but employing the strategy allows some control over the distance between oneself and other people.

For Hortensia (64) it is preferable to find subtler techniques for self expression which accept the passage of time and project a more suitably mature image without compromising her identity by trying to copy the fashions of a younger generation. However she perceives that a lack of suppliers of clothing that she considers to be appropriate for her age group creates a barrier to her ability to successfully project the image she desires.

....if you go to the shops they seem to be geared to the young..... Country Casuals and Jaeger were my mother's two shops and you...you..kind of...you don't want to go there...and yet you look in the shops and think that's probably quite nice...but she's bound to be wearing that dress. It's tricky though...it's quite a tricky one...coming to terms with it is half the battle (Hortensia, 64 Mon.ETM FG 23/3/15).

The difficulty she experiences in the quest to project a suitable self-image epitomises the tensions in society caused by conflicting discourses attached to the meanings of age and ageing. Her views suggest a deficiency in marketing strategies that justify targeting their publicity campaigns at a younger market (Sawchuk, 1995). For Hortensia clothing choice must be carefully negotiated to avoid its tendency to impose a mask by its association with older or younger generations. The women in Hortensia's focus group had strong views about projecting an appropriate public image of themselves as they aged. Twigg (2007) argues that 'clothes are central to the ways older bodies are experienced, presented and understood within culture.....clothing intersects with three key debates in social gerontology, concerning the body, identity and agency' (Twigg, 2007, p.285). She argues that for many women dress can be 'a significant source of aesthetic pleasure, a valued opportunity for self fashioning and for personal reflexivity' (Twigg, 2007, p. 288). Rather than hiding behind a masque in the sense that Biggs (2004) implies, clothes can be a way of asserting self-identity.

I draw on Goffman (1959) to explain the concern expressed amongst these women to portray a confident public self image. They express personal choice but they react reflexively and, in measuring their own behaviour against that of others, they demonstrate that images of the ageing self are co-constructed. Hortensia, who only has sons, recognises pressure emanating from the dominant rhetoric of the cult of youth (Townsend, 2006: Andrews,

1999) which drives her friends to attempt to emulate their daughters' dress sense but in Hortensia's opinion renders them foolish. According to Townsend's (2006) ideas, Hortensia senses that in accepting youthful stereotypes her friends are devaluing age by indulging in the processes of masquerade as described by Katz, (2002) and Biggs, (2004). For Biggs (2004) the adoption of a 'persona' or 'mask' serves to protect the individual from an ageist culture. Thus the subjective and physical outward expressions of ageing are in unison. For Tulle (2008b) the act of adopting such stereotypes limits one's own ability to express personal agency and the opportunity to develop an ageing self. Hortensia's attitude chimes with this desire to project a self-image that is congruent with her age and experience. She demonstrates empowerment by accepting change and finding her own ways of self determination with which she feels comfortable. Her attitude echoes thoughts relating to 'growing old gracefully' (Fairhurst,1998; Jankowski et al. 2014). However, the Monday ETM group (Mon.ETM FG 23/3/15) identified dress sense as a potentially divisive issue.

There is also division in the way that individuals interpret dress code in relation to exercise. Much of this appears to be related to time of day, the culture of exercise being performed or what activities occur before or after class. Pilates participants tend to wear clothing that is exercise specific, whereas suitable shoes are the only definitive article for tai chi participants. Choice of clothing in ETM classes reflects not only the values and expectations that people assign to their particular choice of class but the extent to which exercise features as part of their identity as an exerciser. So there are participants of ETM classes who possess recognisably exercise specific clothing.

Clothing for ETM participants in evening classes tends to be defined by whether participants interpret the session as purely exercise or a social occasion. Carmen (63) has sparkly leggings. Many participants wear make up. Dress code in day-time ETM classes is similarly heterogeneous and depends upon how people feel comfortable. A few have sport specific clothing; most wear loose everyday clothing. They dress in order to feel comfortable in the class or in the town. They adjust their outfit by bringing a flat pair of shoes for the class and then change back into their outdoor footwear at the end. One lady does both her tai chi and her ETM wearing her sensible outdoor shoes and her twinset and pearls.

It remains that these are all objective representations, views of the external observer who seeks to identify with his/her own values (Tajfel, 1974). The examples serve to demonstrate the heterogeneity of an older population, members of whom do not share a single all-encompassing 'mask'. Choice of more modest or loose-fitting clothing avoids feelings of self-objectification which arise from internalising an observer's perspective of their physical selves (Tiggemann and Andrew, 2012). What matters most is for the individual to feel confident about the image being projected; that the image of self is perceived reflexively,

The notion resonates with Bytheway's (1995) view that everyone wants to live a long and successful life but that no one wants to get old. Martha's (70) words pick up on this point. She insists that she is not old. She emphasises the importance of how people behave in response to social discourses, placing the focus of identity on personal agency rather than on appearance.

...people don't perceive us as old as long as we don't act old (Martha, 70 Weds.TC Int. 2/3/16).

Her attitude echoes Jemma's (72) expression of frustration at the behaviour of some older people. Both women see beyond superficial personal appearances. Their views are consistent with the way that Janowski et al. (2014) found that functionality in the form of physical activity 'trump[s] appearance during older adulthood'(2014, P.2). Liechty and Yarnall, (2010) agree that as women age they de-prioritise appearance in favour of health and internal characteristics. Dumas et al. (2005) also contend that women invest less in their appearance in later life.

In the process of successfully navigating the 'silent transformation' (Jullien, 2011) people retain essentially the same identity throughout their lives Biggs (2004). But the processes of cognitive reframing and identity renegotiation indicate a more nuanced view. Zurcher (1977) explains that the ageing self is a fluid process that contains a critical though mutable constancy. The view resonates with Laz's conceptualisation of the ageing identity continuing to change imperceptibly and flow as the water in a stream.

Nevertheless social discourses encourage people to think of the continuum of ageing as a binary opposition (Turner, 1991) as the mask encroaches on identity. Thus people are encouraged either to identify with or resist the ageing process. By comparison Mauss (1973)

argues that we adapt to the changes that occur in the ageing body, saying that we learn 'body techniques' to become an older self. Tulle (2008b) points out that the mind/body split is perpetuated in prevailing discourses which frequently pathologise and biologise the older body so that it is framed as a 'threat to social and self-identity' (Tulle, 2008b, 4). She argues that a biological approach to ageing seeks to normalise the rate at which people age and is reinforced by medicalization. Thus ageing is viewed through a homogenising lens. That the effect is misguided is demonstrated in research with veteran athletes whose performance shows that the ability to confront the challenges of ageing is not evenly distributed across the population (Tulle, 2008a). Furthermore veteran athletes' ability to cope with mind/body instability suggests that fluctuations in energy are normal, not pathological. Likewise Angie (77) confronts her experience of reduced stamina and takes an adaptive approach to managing feelings of deficit by 'pacing herself'. Her thoughts are seen to soliloquise (Athens et al., 1994) alternating between the 'I' and the 'me' (Mead, 1934) in the reflexive manner of the holistic self described by the pragmatists. Other members of the exercise group, for example Linda (68), echo this ability to 'listen to their bodies' and to express a negotiated identity through their actions.

.....you can do - your exercises – you can do it at your own pace. Some people jump about and other people go slower and if you've jumped about for half of it and you think 'I can't do any more of this' then nobody's judging you, you you don't have to stop. You know, you can just do it a bit slower (Linda, 68, Fri. ETM FG 31/10/14).

7.5. How exercise is conceptualised / the place of exercise

For Biggs (2004) it is unusual that older adults should reject the cult of youth for in his view they usually collude with it by adopting a masque or disguise to perform masquerade. This view again suggests a separation between mind and body which is not supported by the embodied approach that the participants take to maintain fitness and functionality.

Some commentators report that engagement with exercise is a 'resistance tool' that older people use to delay the effects of ageing (Hudson et al., 2015; McGannon et al., 2014). The notion implies a negative approach to ageing that implies inevitability of decline which evokes fear and encompasses a foreclosed view of the future. Despite the existence of biomedical markers used to assess ageing processes longitudinal studies ((Hartman-Stein and Potkanowicz, 2003). Vaillant and Mukamal (2001) show that ageing does not proceed at a standard rate nor does it affect all individuals in a uniform way. Only chronology is

inevitable. Participants in this study tend to interpret their engagement with exercise through the lens of the present. They have not overlooked the default position regarding the state that their bodies might be in without exercise but they prefer to focus on the experience of the moment. For example in ETM people speak of the pleasurable experience of expressing embodied identity and 'losing' themselves through moving in time to the music. Participants in Pilates speak of the 'delicious feelings' of stretching out their muscles. Tai chi participants focus upon the nature of calm they experience. Some use the activity as a way of managing pain from arthritis. Participants such as Jodie (83) and Katie (77) are willing to work through the stiffness and pain barrier experienced at the beginning of the tai chi session to attain the relief that they enjoy during the rest of the day.

Participants from all three cultures of activity express satisfaction for the way that their bodies feel after exercise. The memory of the feelings encourages them to continue their engagement with exercise. Instead of resisting a foreclosed vision of the future they see their activities in a positive light; as a way of maintaining their functionality, preserving or defending their assets. Krekula (2007) reflects on the dual experience of being dissatisfied with the body but being able to acknowledge it as a source of pleasure. Wearing (1995) commented on the contradiction between the liberating aspect of leisure and the stereotypical view of ageing that can inhibit enjoyment. Bennett et al. (2017) show how older people can manage this conflict by engaging in self-compassion. Feelings of empowerment ensue as the individual focuses on the pride of current achievement rather than shame or guilt based upon former body status. A positive approach to what an individual 'can do' is essential in encouraging people to engage in, and adhere to, exercise (Dionigi, 2011).

Just like Angie's reflection on her thoughts 25 years ago as a newcomer to a 50+ ETM group, cognitive reframing allows them to accept change as part of the self, to feel comfortable, adjust and find ways of owning the experience which accompanies ageing. Angie (77) and Linda (68) both use their ETM class as a way of monitoring yet supporting and managing the changes they feel in their bodies. Others, such as Charlotte (64) and Hermia (57), use their exercise classes as a springboard into enjoying a long and healthy retirement. The choice of class allows them to express these changes through the medium of an embodied social self. In their exercise class they are not exposed to negative social discourses on ageing. Nor do

they judge themselves by reductionist or normative physiological standards for exercise. The view is upheld by other members of the group.

It's good to do what you can without being judged. (Sheree, 70, Fri. ETM FG 31/10/14).

In ETM classes they feel comfortable as they have autonomy over the level of challenge they accept. Bennett et al. (2017) point out how essential this is in overcoming potential feelings of guilt that the body is no longer able to meet former standards of performance or does not match up to youthful standards that may have been internalised from popular discourse. Participants are not judged but are accepted by the rest of the group. Brigitte (78) expresses her respect and admiration for Wanda (77) who has recently had a knee replacement but who feels comfortable enough within the group to keep attending, to do as much as she can and not to feel embarrassed by the need to sit down to rest or to opt out of or accept alternatives for, activities that are unsuitable for her condition.

Similar conditions are reflected in other classes. In Pilates classes individuals acknowledge body limitations without embarrassment and take control of their actions with confidence. Strength gained as a result of continued practice leads to visible progress in the level of challenge that people accept and is often celebrated in remarks such as 'I couldn't do that last year' and accompanied by expressions of admiration and encouragement. The effects of pride in physical achievement have been acknowledged in the work of Bennett et al. (2017).

7.6. Summary

In acknowledging that theories are an attempt to understand and explain behaviour at a particular time, thus reflecting extant social conditions, it should also be recognised that masking theories were posited towards the end of the 1980s, a decade of 'power dressing' (Marwick, 1998). This was a period when, with the increasing dominance of consumerism, it became important to project a strong, confident image. The consumerist values are concurrent with the rise of the fitness industry.

Theories of masking and masquerade are united in their underlying philosophical dichotomy grounded in the separation of mind and body. The body is merely the canvas on which all manner of consumerist age-resistant techniques may be deployed or, in the case of the mask, on which wrinkles may be allowed to develop naturally. The crux of theories both of

masking and masquerade resides in the language used (Fairhurst, 1998) and, in particular, the overriding acceptance of the dominant discourses which value a youthful body image. Higgs et al. (2009: 703) say, 'we need to see older people as members of generations that both instigated and experienced the rise of consumer society and not as a homogeneous and passive group entering a stable and predictable stage of the life course'.

Furthermore, in social identity theory Tajfel (1969, 1974) argues that all individuals have a social identity and a personal identity. The social identity defines the self in terms of group membership and the personal identity defines the self in terms of personal relationships. Each person has as many social identities as groups s/he belongs to and as many personal identities as relationships s/he is involved in. For Featherstone and Hepworth (1989, 1991) the mask is an attribute of the group of older people but the fact that older people do not constitute a homogeneous group, as demonstrated by the example of dress sense, diminishes the effect and power of the mask. Besides, Craib (1998) argues that identity is a process which emerges within the self and is underpinned by experience. Though Mannheim (1952) has highlighted the importance of taking into consideration the shared experience of cohorts which he describes as 'entelechy', experience is mediated by many more personal factors e.g. family relations, race, culture, social capital. Furthermore participants in an exercise group take on a social identity which is expressed and experienced by means of, and through their bodies. Any symbolic mask therefore becomes redundant, if not irrelevant.

Other commentators reflect upon increasing plurality of vision with regard to the meanings of ageing and how an ageing identity might be expressed. Blaikie (1999) explains that in the postmodern era 'there are no rules, only choices' (1999, 104). Gilleard and Higgs (2000) argue that in such an environment identity management is no longer restricted to a mind / body split. Martha (70) argues that older people have a duty to stand up for themselves and to help to facilitate a changing mind-set. She says

I just think it's changing but we've got to get the perceptions of others to change so that we're not grey or invisible, just wandering around (Martha, 70 Weds.TC Int. 2/3/16).

Following Laslett's (1989) concept of the 'Third Age' supported by Baumeister's (1991) contention that older adults at the turn of the twenty first century attach more meaning to

health, social networks and self-actualisation than to superficial appearances it would seem that theories posited during the era of 1980s 'power dressing' (Marwick, 1998) might be due for review.

I argue that there is evidence that changes in the body occurring around the age of 50 provide the stimulus for individuals to consider or even review their life trajectories (Ballard et al., 2005; Clarke and Warren, 2007). However, in my phenomenological approach to lived experience I demonstrate that the notion of the mask of ageing provides a theoretical motif which has been challenged by other analysts and by some of my participants. The next section demonstrates how, contrary to negative messages conveyed by the notion of the mask and techniques of masquerade, in the postmodern era growing older can be a time of flourishing, resilience and continued wellbeing rather than one of rapid decline and potential marginalisation.

Chapter 8: Responsibilities and challenges of ageing well.

8.1. Introduction

According to Bytheway (1995) everyone wants to live a long life but no one wants to grow old. Earlier I showed how participants in this case study accepted growing older and the processual changes that ageing entails as an integral strand to life itself. Participants develop ways of adjusting to change and adopt strategies to resist or challenge discourses of decline. Their focus is not on ageing but on how to 'age well' which I explore hereafter.

In an earlier chapter I discussed the polysemous nature of 'ageing well', the many synonyms which have gathered around it e.g. successful (Rowe and Kahn, 1997), positive (Gergen and Gergen, 2003) or active (Walker, 2002) ageing, and the frequent discrepancies between meanings perceived by scholars and those put forward by lay people (Hung et al. 2010). Markula, Grant and Denison (2001) refer to the width of the construct when they argue that successful ageing involves more than biology and appearance. Ereaut and Whiting (2008), referring to the wellbeing which is often claimed to be an indicator of ageing well (Laslett, 1989; Baumeister, 1991; Rojek, 2005; Nimrod, 2007), argue that as a cultural construct the notion is open to definition, 'wellbeing is no less than what a group or groups of people collectively agree makes "a good life"' (Ereaut and Whiting, 2008, P.1). Nevertheless at government levels both locally and globally vigorous attempts are being made to define these notions in order to express how Gross Domestic Product (GDP) is being effectively utilised to increase feelings of subjective wellbeing (Sen, 1999; Stiglitz et al. 2009; Beaumont, 2011; Atkinson et al., 2011). In terms of social policy links between ageing well and subjective wellbeing (SWB) are construed as a fungible concept. Attempts to measure SWB are aimed at illuminating the benefits or bonus to the nation that are brought by effective reinvestment of GDP (Stiglitz et al., 2009; Beaumont, 2011). In contrast neoliberal policies put the onus on the individual who should take the responsibility to 'age well' (Higgs et al., 2009; Pike, 2015). Hence effective deployment of resources is displayed in population figures which lack description and do not reveal the circumstances of lived experience. On the other hand participants in this case study often mention notions of responsibility in relation to growing older. Sense of responsibility is expressed both for themselves and towards others, especially towards family members. The actions it generates can often be seen as the means to retaining independence – the common, most valued component of all

the lay definitions of 'ageing well' (Hung et al., 2010; Barron, 2016). Issues such as health, coping with change, time management, maintaining independence, body awareness and social networks emerge as salient in this research under the overarching theme of taking responsibility and dealing with the challenges of ageing well.

In this chapter I explore how participants confront the challenges of ageing. I argue that maintaining good quality of life, experiencing wellbeing or ageing well is a natural desire and that the reason that Bytheway (1995) says that no one wants to grow old is that people fear the outcomes of the discourses of illness and decline that ageing has traditionally generated and which remain powerfully extant. Coupland (2009 p.855) argues that 'we are both constrained and enabled through our engagement with cultural scripts about ageing'. Given that the health of the body and the mind are fundamental to the processes of ageing well, regardless of how the construct is defined, I begin by discussing the responsibilities and challenges that relate to these aspects of health and wellbeing.

8.2. Health and wellbeing

One of the few features of ageing well upon which most definitions, both academic and lay, concur is that of the fundamental importance of health. Nevertheless, how health is defined tends to divide them, whether it is conceptualised as the absence of illness or a more complex concept. For the purposes of this study I refer to the World Health Organisation's (WHO) definition delineated in the WHO Report on Health and Ageing (2015). Health and ageing are united in a process which comprises two components: intrinsic and extrinsic. Intrinsic health relates to everything that pertains to the individual's body, mind and self. Extrinsic health relates to the context in which the individual lives and the environmental factors that can influence or shape life and how it is experienced.

Judging by the information given on the forms my participants fill in when they enrol for exercise the desire to maintain or improve health is high on their list of reasons for joining the exercise class. The desire is supported by many passing comments in the data I have collected. For example Sheree (70) explained how she saw the connection between health and exercise in terms of coping with pain caused by an injury to her back (see p.128, chapter 6). On another occasion and in a different group (Tues.ETM FG 28/8/14) Joanna (83) justifies her long and continued attendance at the group,

I think it makes you use muscles that you don't normally use (Joanna, 83 Tues.ETM FG 28/8/14).

Participants often say that they are taking responsibility for their own health by attending an exercise class. Hence their actions affect both the self and the context in which they live as described in the WHO (2015) definition of healthy ageing. Engagement with exercise leads them to interact with other members of the class and affects the way that they feel as a result, which, in turn, has a domino effect on their subsequent interactions. Julian's wife remarked upon how his disposition improved after his attendance at his tai chi for arthritis classes and Julian (77) himself explained that he found multiple benefits to engaging in this exercise.

Exercise enrolment is also mediated by personal preference for style of exercise as well as awareness of physical capability which governs choice of one particular type of exercise over another. For example Pilates participants often choose that genre of exercise because they prefer not to get 'hot and sweaty' (Mo, 61 Weds.P. FJ 11/5/16). Many of the tai chi participants have problems with their joints and are attracted to the class for its advertised emphasis on arthritis. By contrast participants in ETM prefer more vigorous exercise. But what unites people in a holistic approach to health and exercise is that, regardless of exercise style, many refer to the way it makes them feel afterwards and how it improves their ability to cope with life. Hermia (57) emphasises that contrary to her expectations of needing to rest after the exertion of her exercise class she feels energised and ready to confront other challenges. Her exercise experience is not restricted to the physiological.

And I always feel that I can go home and do things. I don't feel that I need to sit down and recover - which is nice. So, I think it makes me feel more positive about the world in general. It gives me more of a sense of perspective on things (Hermia, 57 Weds.P Int. 27/5/15)

That said, most participants claim that during the process of exercise it is important for them to stimulate both body and mind. Linda (68) says

It's not only the physical bit - it's - you gotta get your mind in gear and make sure that you're doing everything - and I think that's good (Linda, 68 Fri.ETM FG 31/10/14).

She compares her ETM routines with the mindless repetitive routines she used to do in the gym at the leisure centre before she became overcome by boredom and started to try out

other forms of exercise. Sassatelli (2014) recognising this syndrome argues that a dualistic approach to body and mind is a requirement for gym members to adopt in order to rise above the boredom and gain satisfaction and health benefits from their workout.

It is this dualistic approach to 'mind over matter' that is implied in the Chief Medical Officers' recommendations (Everybody Active, Every Day, 2014) where exercise is described in terms of frequency and intensity. Exercise is reduced to a medicalised function that focuses on an exhortation to meet the requirements necessary for achieving a health benefit. Consideration is increasing on how to integrate exercise into lifestyle for the benefit of health.

Chantal's (66) experience illuminates the difference between these two approaches to exercise for health improvement. Chantal says that she enjoys the mental stimulation of trying to follow instructions to perform the movements involved in her Pilates exercise. She experiences satisfaction when mind and body are integrated, working in unison. She also enjoys the camaraderie which accompanies class proceedings both before and after class. However she experiences none of this from her bi-weekly hour long lane swimming activities. Speaking of Pilates she says

Pilates is pleasurable. I enjoy the exercise and the camaraderie and the whole experience. I feel it's doing me good (Chantal, 66 Weds.P PO 5/8/15).

She said the class was a bonus to her swimming which she undertakes as a means of protecting herself against developing cardio-vascular disease to which she believes she is genetically disposed. When I asked her what it felt like to swim up and down for an hour she replied that she felt

Nothing. I'm just there. It's not pleasurable. It's boring. It's a discipline. I do it because I want to stay fit and healthy for as long as possible. I go on Monday and Thursday at 8a.m. and then it's over and done with for the day and I can get on – don't have to worry about still having to do the exercise (Chantal, 66 Weds.Pil PO 5/8/15).

I draw on the theory of effort-reward imbalance (Siegrist, 1996; Siegrist and Marmot, 2004) referred to by McMunn et al. (2009) to explain the discrepancy between Chantal's feeling towards different types of exercise coupled with her continued commitment to an exercise which she does not appear to enjoy. McMunn et al. (2009) exploring the relationship

between socially productive activities and wellbeing in older adults found that greater wellbeing is associated with receiving rewards for effort. Chantal perceives delayed gratification in terms of preserving longevity by offsetting a known health risk with her engagement in lane swimming. There is also satisfaction in demonstrating control over her body. Control and self expression through the body is also involved in Pilates. However this form of exercise is fulfilling in other ways. It is more immediately fulfilling as, in addition to feeling the effects of the exercise on her body, she enjoys the company of other people. McMunn et al. (2009, p.766) argue

When an imbalance is perceived between the rewards received in relation to the effort expended, the norm of reciprocity has been broken which, in the long run, elicits strong negative emotions of injustice that influence self-esteem’.

This is not the case for Chantal but it might be perceived to underlie Linda’s (68) withdrawal from gym membership and to search for more satisfying modes of exercise (see p. 121). Despite having paid to be a member of the gym she felt no sense of belonging which Stillman and Baumeister (2009) consider to be an essential attribute. Driven away by boredom with exercise in the gym her activities no longer fulfil the criterion of being ‘meaningful and purposeful’ which Rowe and Kahn, (1997) associate with the promotion of wellbeing.

With this unusual attitude to different cultures of exercise Chantal’s thoughts tend to bridge the divide between a holistic approach to health and exercise and the dualistic medicalised approach of ‘mind over matter’ that Sassatelli (2014) claims to be necessary to experience satisfaction from performing gym routines effectively. Amid other views that participants express, Chantal’s approach is unusual in that she finds it difficult to understand why people procrastinate and prevaricate about exercise when they know it is good for them.

So many people say ‘Oh, I should take more exercise’. Why don’t they just do it - instead of talking about it? (Chantal, 66 Weds.P. PO 5/8/15).

However, pride expressed through notions of discipline or control were insufficient to keep Linda going to the gym. A more frequent view suggesting reluctance to cope with possible discomfort is expressed by members of a community group who walk to the class and encourage each other to keep up their good intentions to exercise by calling for one another en route.

When it's *cold* [shivers] and you got the central heating on and it - but I still come, cos I enjoy the company and I enjoy the exercises now I've packed up work I need something to keep my old heart going (Carmen, 63 Thurs. ETM FG 21/3/13).

Finding an answer to Chantal's question (above) points to the social construction of health and exercise, the many meanings attached to ageing well and the rift between how the concepts are understood at population and individual levels. The first, understanding at population levels, relates to theories of ageing that are used normatively to produce statistical models that guide social policy. CMO recommendations ensue from these and imply the notions of duty, responsibility and discipline taken up by Chantal in her attitude to preserving her health. At the turn of the millennium, Binstock et al. (2000) referred to the process as 'the unbearable lightness of theory' and criticised the use of 'Big data' as a means of determining what all people of a certain category should do. The second, concepts understood at individual levels, relates to how people actually live their lives. Tulle and Phoenix, (2015) highlight this division in relation to contrasting academic perspectives.

Brigitte (78), a former yoga teacher, baulks at the time spent in attending medical screening appointments – a process that Higgs et al (2009 p.692) refers to as 'medical surveillance' for its reductionist manner of recording population health statistics.

I have to go to the optician's and the dentist. Get your ears tested, your blood tested. You know. By the time you've done all that there's not much time left (Belinda, 78 Fri.ETM FG 27/3/15).

Following the focus group Brigitte, (78) whose husband is a retired surgeon, suggests how statistics culled from screening contributed to representing the health of the nation in a superficial way. Framed by Rowe and Kahn's (1997) notion of successful ageing the statistics present a normative view of health lacking the detail or progression that would be reflected in narratives relating lived experience. Atkinson (2013) argues that a common response to diversity is standardisation. It was not that Brigitte (78) resented the attention afforded by the health service but just that it did nothing to improve her health and got in the way of her doing other things. Her health was being compared to a standardised integer. Tulle and Krekula (2013, p.7) describe this normative approach as 'the urge to extract a set of objective principles constituting ageing as a universal and therefore homogeneous condition from which little deviation could be envisaged'.

In a similar way statistics produced by health surveys on levels of exercise participation that match CMO recommendations provide a tenuous link to health because they are gathered quantitatively and not linked to the personal health conditions of the individuals concerned (Higgs et al., 2009). Brigitte's (78) remarks highlight the difference in purpose that is involved when seeking to attain health via an agentic approach and merely checking to see to what extent the concept exists by applying monitoring techniques. She told me that she had worked in alternative therapies all her life and so was used to dealing with the whole person not just a medical condition. She recognised the dichotomy between her approach to health and that of her husband, a surgeon, and his colleagues and spoke from the long-term experience of frustrating debate. She understood how the two approaches could run parallel but bemoaned the lack of interaction between the two. Her views do not exist in isolation however. Das and Horton (2012) call for a rethink which would dilute the tendency toward 'prescription' of and 'guidelines' to exercise as being beneficial for health in favour of a more critical approach to the individual.

In terms of the link between exercise and health, Sheena's comments (70 Fri.ETM FG 17/10/14) reveal the richness of a holistic approach to achieving health and wellbeing through exercise. First she says of ETM:

I think what's nice about your class, Sue, is you're forever changing it and it isn't just about doing half-jacks or whatever. You make our brain work as well (agreement) and coordination. And it's a very friendly class so it's very sociable (agreement) I mean I'm not one to go to the gym cos I like to get out and meet people and - that's what's so nice about it, you know. And I don't think anybody feels intimidated because we're all bad at doing it. (Sheena, 70 Fri.ETM FG 17/10/14).

Sheena is also member of Tues.TC and compares her ETM with her TC. She enjoys the freedom of movement and ability to express herself in an embodied way following the rhythm of the music in her ETM class and is not inhibited by making mistakes in the routine. She describes the movements in her tai chi sequence as purposeful and comments on the level of concentration required in her efforts to perform them correctly.

With the tai chi you could never let your mind wander because if you did you'd be absolutely lost and if you think 'Oh, I must get a loaf of bread on the way home (laughter) It's really good but if you lost your train of thought then, that was it, but I always finish tai chi feeling really relaxed - not that I'm a stressy person but sort of calmer - and it certainly made my balance a lot better so it was a different sort of

exercise but obviously still very good and I've never done anything like that before. I've never tried yoga. It doesn't appeal to me But the tai chi I think is very very good (Sheena, 70 Fri.ETM FG 17/10/14).

She experiences a synergy from performing the tai chi sequence of movements together with the rest of the group that she does not experience when performing them alone. Her words indicate that the relational quality of the exercise adds to its capacity to benefit health. Her thoughts echo Atkinson's (2013) view that wellbeing is co-constructed, the product of interaction and shaped by time and place. The example also draws attention to the relationship between intrinsic and extrinsic healthy ageing highlighted in the WHO definition of healthy ageing (WHO, 2015). The environment of each class and the meanings and values attached to each specific form of exercise shapes Sheena's exercise experience.

The importance of the interaction between the two components of intrinsic and extrinsic health became clear when discussion in a focus group (Fri.ETM FG 17/10/14) turned to the forthcoming 'Ageing Well' conference at the university.

Ageing well doesn't mean staying healthy. I mean - there are people who are disabled and ill but they're still ageing successfully because they've achieved or can achieve what they want to at that point in their lives (Clarissa, 67 Fri.ETM FG17/10/14).

Clarissa's comment shows how unstable meanings attributed to health can be and supports Ereaut and Whiting's view that 'wellbeing is no less than what a group or groups of people collectively agree makes "a good life"' (Ereaut and Whiting, 2008, P.1). Tulle (2008b) remarks that the ability of people suffering from long-term disability or chronic health conditions to maintain a positive attitude towards life and to age well is often overlooked. In their studies of people who habitually confront and cope with impairments to health Charmaz (1995) and Seeman et al. (1999) highlight the qualities of persistence and resilience which prevail irrespective of morbidities.

Quite a few of the participants in my tai chi for arthritis classes demonstrate this phenomenon. A shining example is Jodie (83) whose arthritis obliges her to walk with a stick and who has given up driving. The immense value that she attaches to the health benefits of her tai chi class are particularly highlighted by her willingness to pay for a taxi to get to the class on the occasions that lifts are not available. She is also fortunate in that she has the resources to do so. She says that the physical, mental and social benefits last for the rest of

the day. Being a widow who lives alone she also attaches importance to the opportunity for, and stimulus of, social interaction (Jodie, 83 Tues.TC PO 24/11/15). Over the six or seven years that she has been a member of the group her health has passed through some difficult stages but she has always remained in contact, come to class as often as possible and found ways of gradually adjusting to her changing health status. It would seem that the support she derives from being a member of the class goes beyond the immediate physical benefits of exercise and is reminiscent of Bidonde's work (2009) on introducing exercise to women who were recovering from illness.

The challenge of coping with changes in health status leads into another salient theme that of coping with change in older life. Stillman and Baumeister's (2009) work highlights the link between belonging and meaning in life. The existence of such a link supports qualities of resilience which are important in coping with change.

8.3. Coping with change

In addition to changes in health status the major challenges to ageing well that people identified were those occasioned by retirement and bereavement. Whilst changes in personal health status activated qualities of persistence and resilience, changes in the health status of a spouse proved more challenging especially if the change was sudden.

For Marjorie (76), whose life had recently been transformed by the onset of her husband's serious illness, it was the sudden shock and dramatic change in circumstances that had impacted upon their lives as much as the illness itself. The change had obliged them to make adjustments to their lives. Marjorie saw change in later life as a major challenge to the capacity to age well.

Marjorie (76) People as a general rule don't like change. They say that's one of the biggest things in your life, isn't it? Especially when you're older

Clarissa (67) Perhaps it's change that is not welcome - that people find difficult. If Illness suddenly comes along and you're not able to do things that you were able to do before you're going to think about it an awful lot. Probably become depressed about it. (Fri.ETM FG 20/3/15).

Despite her devastating recent experience Marjorie still felt that individuals should take charge of their own health and display a sense of responsibility towards maintaining it rather than relying on expert help.

Marjorie (76) And In a way I think you have to take responsibility for yourself. A lot of the things you hear these days people aren't able to cope and they just go off to the doctor or off to the - instead of being able to cope. People aren't responsible for their own careers either. They rely on other people to do it for them - in a lot of ways. (Fri.ETM FG 20/3/15).

The idea of responsibility and adopting an agentic approach to health maintenance remained uppermost throughout the group's discussion. Often people talked about being 'lucky enough' to remain healthy and the impact that this might have upon quality of life and the ageing process, but adopting a positive attitude was also implicated in seizing the opportunity to enjoy life as much as possible.

It is a view upheld by two participants of tai chi who are each caring for partners suffering from dementia. Katie (77) and Madge (73) consider that their tai chi sessions provide an oasis of calm away from the pressures of feeling constantly responsible for another person. They employ the breathing techniques they have learnt to help them to cope at times that are particularly stressful.

8.3.1. Retirement

Retirement, though a more predictable event in that it can usually be anticipated and so admits time for planning, held its share of unpredictability. This is largely because of the discrepancy in meanings attached to, and perceptions of retirement between those who are still in paid employment and those who have retired (Ekerdt and Koss, 2015). Whilst the cessation of work may be eagerly anticipated it is difficult to imagine what life will really be like once freed from the confines and duties of the routine that work imposes. Expectations pre-retirement are founded in established stereotypical visions of retirement being, for example, a well-earned rest or period of slowing down, mitigated by the fear of impairment, disease and death. Ekerdt and Koss (2015) show how individuals pass through a period of transition lasting approximately two years post-retirement. Then the responsibilities associated with maintaining the active, healthy quality of life of the 'third age' become apparent and fears of 'fourth age' frailty are accepted, denied or offset by action. However, the ability to demonstrate agency, to adjust to the new lifestyle, may be facilitated or restricted by personal, social or financial capitals.

Preparation for the transition tends to be restricted to financial planning (Osborne, 2012). For those who have loved their jobs retirement has been likened to bereavement (Osborne,

2012). Regardless of the actual work involved, the routine imposed by work has the effect of framing the day or even the life pattern (Van Solinge and Henkens, 2008). Charlotte (64), Petra (67) and Hermia (57) all disliked the time spent in traffic on the journey to work but had not realised how much this unpleasant experience was an accepted part of their day. Though they were glad not to have to queue in rush hour traffic any more, at first, their relief was still tempered by a sense of bewilderment because they had all this extra time at the beginning and end of the day.

Ekerdt and Koss (2015) demonstrate how free time can initially be hard to manage but that once people develop their interests or find new ones they begin to be as protective of their time as they were when they were working. The two simple propositions of Havighurst's (1963) activity theory describe what the process involves if transition is to be made effectively. Wellbeing is associated with a) higher levels of participation in social and leisure activities and b) role replacement when existing roles are relinquished. What is most difficult is the transitional stage which Ekerdt and Koss (2015) contend usually lasts about two years. Victor (1994) identifies five stages in the transition ranging from growing interest as retirement approaches, through initial euphoria, followed by the stress of adjustment to settling down into a new lifestyle and finally disengagement with the former work identity. Though the lifeworld may shrink in terms of formal roles e.g. parent, breadwinner, renegotiation of identity tends to expand the domains via which identity can be expressed (Teuscher, 2010). Viewed from its position as the beginning of the Third Age, retirement at the beginning of the twenty-first century can be richer and more complex than its former conceptualisation as the final stage of life (Vickerstaff, 2015).

The inertia that may develop during this period can cause problems for wellbeing and adjustment to a new lifestyle (Ryff, 1989). Osborne (2012) argues that exposure to retirement education in the several years prior to the tentative retirement date is crucial in ensuring a smooth transition. However changes in state pension age, increased longevity and demographic change have had an evolutionary effect on the nature of retirement to the extent that it is often qualified as 'partial', 'phased', 'gradual' or 'working' (Vickerstaff, 2015). In such times of uncertainty and diversity of individual circumstance Osborne's view about preparing for retirement becomes all the more salient. Choice may be particularly restricted for individuals whose life course has been fraught with accumulated

disadvantage, thus imposing limitations on their ability to renegotiate their work/life identity. Some of the participants in the case study have experienced such changes in that they have had to work longer to obtain their state pension and may have adopted a phased approach to retirement by working fewer hours.

Atchley (1993) theorises that mental alertness and ageing well are facilitated by the practice of not only continuing lifelong interests but in starting new ones in retirement. Many participants had become engaged in voluntary activities or had taken up new pastimes aimed at keeping their minds alert.

I think you've got to keep on trying new things though. It's very difficult - it's very easy to - do the same things all the time. If you do something different - you've got to get yourself out of your comfort zone (Rhona, 71 Mon.ETM FG 23/3/15).

Participants who had recently retired and whose lives were no longer regulated by duties and work schedules were more aware of their changing identity. When Hermia took early retirement from headship of a primary school she realised that she had been totally defined by the confines of her job and had no idea who she was. She appeared to be bewildered by her new status in life.

Sue: So, how do you feel about this new you?

Hermia (57): Ahm - I don't really know - I think - erm - I guess - I guess in a stupid way I'm quite relieved that there's still a person there - given that the role was such a big one and took such a lot of time. I was a bit concerned - well, I was very concerned that if you took that role away - who was left - now. And who would be interested in that person who was left now - and what would that person who was left now be interested in and what would that person do with all those hours that used to be spent - in work, preparing for work, sorting things out after work - erm - because it was all encompassing. And because I *knew* who I was in that role and when you take that role away who are you then? (Hermia, 57 Weds.P & Weds.TC Int. 27/5/15).

Retired nurse, Sheree (70) expresses similar feelings of identity loss when she stopped work, the subsequent time it took to renegotiate her identity and adjust to a new lifestyle.

The first couple of years I said 'What am I to do? My life doesn't mean anything'. But then I thought I've worked long enough and it's time to spend time for myself. Besides I'm not capable of doing the work I did when I was twenty. I am enjoying things that I want to do rather than the things I have to do (Sheree, 70 Fri.ETM Int. 5/12/14).

She particularly appreciates her newfound 'time sovereignty' (Ekerdt and Koss, 2015) and the freedom from the stringencies of her work life that she no longer has to observe.

Life has changed. I can enjoy more. Sleep as long as I like, come to keep fit when it suits me and all the things I can do that I wasn't able to do when I was working full-time. I couldn't wear nail varnish when I was a nurse (Sheree, 70 Fri.ETM Int. 5/12/14).

She adds, with emotion

One thing I'll never regret is that I wasn't working when my mother was alive and I had time to look after her (Sheree, 70 Fri.ETM Int. 5/12/14).

Hermia felt excited about being on the brink of discovering who she was and having the opportunity to try out many new activities in the process.

Yeah! And having time to do those things and thinking oh, perhaps I'm not as brain dead as I thought I was. You're defined by what you *make* for yourself to be. You don't have to be an ex *whatever* because you've got space in your life to go and find new things to be. (Hermia, 57 Weds.P & Weds.TC Int. 27/5/15)

One of the reasons for her decision to take early retirement was the realisation that she was physically exhausted and feared the consequences for her health of carrying on, as well as the way that health problems might impact upon her ability to do her job effectively. Her views pose questions for the nature of work in a climate where people are being expected to retire at increasingly older ages (Hill, 2017).

Though the two women have never met, Hermia's feelings of exhaustion were shared by Charlotte (64) who similarly had just retired from an extremely time-consuming job. She felt lucky to have a pension at her disposal and mused about how she was going to spend it. She too was shocked at the consequences for her body of a punishing but sedentary work schedule.

I think primarily I realise that when I gave up work where I'd had a - in the last probably 6 or 7 years of my working life I was *very* sedentary – a long drive to work; sitting at a computer; a long drive back at the end of the day and I knew it wasn't good for me sitting all day long but too tired at the end of a long day to engage in activities which I know I needed to do and the crunch came when I actually left work ..and so when I started my keep fit classes it was with a view to getting myself more mobile. Mobility was an issue for me because my knees told me 'You can't' (Charlotte, 64 Mon.ETM Int. 6/4/13).

Both women were determined to remain active, had already investigated a number of activities, but were suddenly brought face to face with social discourses relating to ageing that they had not previously considered. Charlotte (64) was particularly shocked at the assumptions that she felt were being made about what older people want. She found it odd that the local cinema provided tea and a biscuit to accompany the weekly senior screening. Not only did she see this as an ageist assumption but she was equally shocked to see the rest of the audience calmly and without question queuing up to receive their free drink.

Member of a tai chi group, Martha (70), is also shocked by the behaviour of some older adults and their acceptance of how they are treated. She says,

I think this is where you have to stand up for yourself. You have to stand your ground. I think more of us should do that. We continue to fulfil our roles. We don't just stop' (Martha, 70 Weds.TC Int. 2/3/16).

Jemma (72) says she often thinks 'For goodness sake!' with exasperation at the behaviour of her some of her peers.

In fact retirement appears to be much more of a critical moment, capable of providing individuals with a jolt to self-identity than Jullien's (2011) unexpected glimpse of oneself in the mirror. Her new possession, a bus pass, brought Charlotte (64) into abrupt contact with stereotypical perceptions of older people and the way they should be treated. The second time she used it after retiring from her intensely responsible job she was affronted by the driver's solicitous enquiry regarding her destination and not least by his use of the epithet 'dearie'.

The bus driver said to me...I put my thing on and he says, erm, 'D'you know where you're going, dearie?' Haa! (laughter) I said 'Yes I'm going to Aylesbury' 'You know I just wanted to check that you're on the right - that you've got the bus the right direction.' I was quite insulted and I thought 'Do I look like - Do I look like I don't know where I'm going?' (Charlotte, 64 Mon.ETM Int. 6/4/13)

The examples above suggest that the way that older people are perceived and are treated has little to do with appearances as in the mask of ageing but is socially constructed in relation to symbols (the bus pass) and contexts (the senior screening at the cinema). Both of these are viewed by outsiders in a stereotypical manner. Meanings attached to the symbols and events vary depending on whether they are perceived by a member of the 'in group' (younger people) or the 'out group' (older people) (Tajfel, 1969; 1974). Remarking upon

how this phenomenon produces ageist attitudes Nelson (2004) highlights the anomaly that occurs in that if people are lucky enough to live long enough they will eventually become members of the out group themselves. Yet ageism remains the form of prejudice that is the most condoned worldwide.

Participants of a focus group (31/10/14) who had retired several years earlier felt that the traditional discourse of rapid decline applied to older people was no longer justified and that there was evidence to show the effects of the responsible desire to maintain independence for as long as possible.

Well, people of 60 are younger than they were in my parents' day and what they say is 60 is the new 50, 50 is the new 40 and all that business. I think it's true, (general agreement) actually, and I think it's probably because people take physical exercise more (Linda, 68 Fri.ETM FG 31/10/14).

Coupland (2009) explains that people are both products and producers of discourse and so the way that ideas on ageing are framed can be both constraining and enabling depending upon the perspective of the speaker. However Linda's (68) remarks resonate with the blurring of boundaries between middle age and post-retirement identified by Featherstone and Hepworth (1991). Gullette (2004) refers to this stage as 'young old age' building upon Laslett's (1989) term of the Third Age during which people are able to enjoy freedom from the responsibilities of paid employment and to find other forms of expression as discussed in 'Cultures of Ageing' (Gilleard and Higgs, 2000). However the examples of Charlotte's (64) and Hermia's (57) experience quoted above, in conjunction with work on transition to retirement (Ekerdt and Koss, 2015) indicate that while the blurring may exist, and is being assisted further by the removal of the default retirement age, the rupture in habitual lifestyle caused by the abrupt withdrawal from paid employment presents challenges. It has implications for the renegotiation of identity and requires time for adjustment.

At the point that I interviewed Charlotte (64) retired status was still quite new to her but the sense of agency needed to confront the transition is reflected in the comments of two other professional women who had retired several years earlier. As single women they discussed their experiences of trying to adjust and to create a new lifestyle. Petra (67) felt particularly isolated. For her there had been no phased retirement nor support for the transition.

I was just - *lost* for quite some time. I'd worked for small company so there was no support, just – well - BYE! and thank you very much. Didn't know what to try. Several people made suggestions and I tried out several groups but they just didn't gel. I went to same yoga teacher for years and tried someone else when teacher retired but it was different and I didn't like it. (Petra, 67 Tues.TC FJ 8/7/14) .

Paula (72), conversely, felt that she had been supported by her company's pre-retirement sessions and organised recreational activities but needed to find her own niche. She started with an art group which led to history interest via the BBC magazine and conferences in Malmesbury. That prompted setting up a book group. She is now too busy for the recreational support provided by her former employer. In Ekerdt and Koss' (2015) view she is now demonstrating 'time sovereignty', protecting her time for the things that she likes doing most. Both women appreciate the tai chi class because it is specifically for arthritis sufferers or people with joint problems so they feel they have something in common to share. They say that the sense of belonging is a bonus that they were not expecting to get from an exercise class.

Their appreciation of belonging is echoed by Sheree (70) who says of her regular class

It's sociable and welcoming and non-judgemental. We talk to each other and have a laugh during sessions. For me the social contact is just as important as exercise. Exercise makes me feel good and happy (Sheree, 70 Fri.ETM Int. 5/12/14).

Baumeister and Leary (1995, p. 497) argue that the need to belong 'is a powerful, fundamental and extremely pervasive motivation' and that people tend to resist the dissolution of existing bonds such as those formed in the workplace. The ability to forge new bonds relational to other people in a shared activity thus helps to smooth the transition towards negotiating a new identity. The focus on meanings and purpose attached to the activity is particularly significant in building new friendship networks as the individuals may not share any prior history as in the sense of workmates or neighbours (Kahn and Antonucci, 1980).

Curiously it was only the people who had recently retired who talked about the state of their bodies and detailed what they hoped to achieve by coming to exercise classes. For the rest reasons for membership of an exercise group as part of the plan to stay fit and healthy seemed axiomatic. As argued by Merleau-Ponty (1962) the body is seen as central to existence and steps should be taken to maintain its functionality. However retirement from

the labour market, especially from a job where the hours were long and the work of a predominantly sedentary nature, produced the shocked realisation that the body was even less flexible and mobile than expected.

The examples above show how identity suffers a sea change in the transition to retirement. Kohli (1988) explains that this is because we live in a 'work society' and the only identities that are valued are those connected to work. Retirement is a 'roleless role'. Consequently individuals are often brought up sharp by the realisation of how society perceives, reacts to and treats retired people but that people are capable of resilience and find ways of adjusting to their new status. Agency is directed at asserting and maintaining conditions of independence that becomes expressed in ways other than earning power.

8.3.2. Widowhood, negotiated identity and family responsibilities

A further major challenging change that tended to happen well after retirement and had implications for the way that independence was expressed was the need to cope with the death of a partner or spouse. The experience brought with it further responsibilities. In addition to taking charge of their personal time and forming new routines to avoid loneliness, widows felt increased responsibility towards family members. They did not want to appear reliant upon sons and daughters whose time was taken up with their own children and neither did they want to be perceived as incapable. Cara (72) explained the horror she experienced when the smoke alarm sounded in the middle of the night and she did not know how to silence it.

Though the desire to stay independent for as long as possible is salient in all lay definitions of ageing well (Hung et al., 2010; Barron, 2016) Cara does not relish the changed nature of her independence that widowhood has cast upon her. She and her husband had had clearly defined roles within the household and she spoke of having to cope with feelings of fear and helplessness when she was awakened in the middle of the night by the sound of the smoke alarm. It was the circumstances of finding herself alone and in the dark that rendered her helpless. The event underlined her sense of loss, her helplessness and her loneliness. Its emotional impact upon her only became muted by sharing the story with other members of her ETM class, some of whom are widows like her. By day she has developed strategies that

help her to cope. These involve time management and carefully planned opportunities for social interaction.

I think if you've got your partner or your husband your life is different but I think when you're on your own you have to fill every single day. I've got on my calendar something to do every day. It doesn't matter if it's just coming out for coffee or - that's good I've got something to fill that day (Cara, 72 Mon.ETM FG 27/10/14).

There are similarities with the strategies adopted when adjusting to the changed life circumstances of retirement but the jolt and sudden loneliness provided by the rupture of loss tends to be more powerful. Marjorie speaks of the need for agency.

And it depends. Loneliness is a big thing, isn't it? People that are on their own. Suddenly - I mean I *could not* have done anything after the death of my husband because we were married 50 years. But you have to force yourself to go out and do things (Marjorie, 76 Fri.ETM FG 20/3/15).

Both women find that they have to renegotiate their identity as an individual rather than as a partner in a relationship. For Jemma (72) asserting her independence in widowhood makes her feel very selfish

Suddenly it's just ME and it's - oh, it's a very *selfish* life that I lead because I only have myself to please - and it's the first time in - 67 years that I've had that feeling and you know - 67 when Ernie died - so for all those years I've been a daughter and a wife and a mother and suddenly - you're on your own! And you've only got yourself to please which is *hard*. I find that very, very hard (Jemma, 72 Mon.ETM FG 27/10/14).

She confesses that she feels she has lost all sense of belonging in life.

I think we all want to feel - useful - to *somebody* (agreement) important to somebody - even if it's just the cat (laughter) I think you *do* - cos - you've gone from being - whatever you were at work. You've gone from being a wife - and a mother. I'm still a mother but it's completely different. I'm not Number One in anybody's life, that's what I'm trying to say (Jemma, 72 Mon.ETM FG 27/10/14).

But she recognises that there is ambivalence in these feelings because she says,

it's - just - not being - necessary to anybody. Now, If my boys - heard me say that they'd be *dev*-astated, absolutely *dev*-astated (Jemma, 72 Mon.ETM FG 27/10/14).

There is a tension between trying to

lead an - as independent life as it's possible to lead - so much so that - again, my family would tell me off for trying to do things when you could've asked me to do that, Mum' (Jemma, 72 Mon.ETM FG 27/10/14)

Others express this as a need to keep going, and resist the temptation to give up. But whereas it might be acceptable to adopt a more leisurely pace in retirement, as Margot (65) says,

When you're retired and it doesn't matter whether you do something today or tomorrow or take several days to do something. (General agreement) You can go at a slower pace. Maybe if I had - more to do - I would *do* more. Whether I would find the energy or whether I would feel tired I don't know (Margot, 65 Mon.ETM FG 27/10/14)

Jemma believes it is a far more dangerous strategy now that she is a widow.

It's very easy to stop wanting to do things, I think. And once that starts I think that's very, very – worrying - and that *is* very ageing - I think - when your motivation goes (Jemma, 72 Mon.ETM FG 27/10/14).

Their views reflect an awareness of the negative qualities related to giving up, that would prevent individuals from ageing successfully (Rowe and Kahn, 1997). In demonstrating responsibility for herself Jemma (72) believes she is also discharging her responsibilities towards her family in that she is not causing them concern. Conversation on these matters developed a sombre tone but members of the group went on to say what a relief it was to have the opportunity to give voice to these issues which otherwise would never find a natural forum for discussion. They refrained from broaching them with family members as they found the issues too painful to discuss with them. Their protective actions demonstrate another example of coping as well as discharging a feeling of parental responsibility. The women concluded that if necessary they would be more likely to call on their peers for support. This is a notion which has recently been recognised by the charity 'Ageing without Children' which is currently facilitating the establishment of peer support networks for older people. In doing so the charity does not exclude people who do have children. Rather the rationale is that peers are more likely to be nearby and available to help.

The last section of this chapter examines the links between the themes discussed so far and the benefits that participants gain from engaging in exercise.

8.4. Body awareness

I think people should look after your own body (Rhona, 71 Mon.ETM Int. 11/3/13).

Apart from the testimony of recent retirees mentioned above this is one of the few direct comments about the body occurring throughout the data arising from interviews and focus

groups. Most of the time the body is regarded as an 'absent presence', (Shilling, 1993; Oberg, 1995) an integral part of the processes of ageing and exercise. However there are times when the body is perceived objectively. Yet 'being' a body and 'having' a body (Stevens, 1996; Howson, 2013) operates rather like an optical illusion e.g. the vase whose profile comprises the side view of two faces looking at one another. The two views are held in cognitive synchrony but it is impossible to see both images simultaneously. For example, in my role as exercise instructor I check a newcomer's health status using a PAR-Q (physical activity readiness questionnaire) at the beginning of the course and discuss the information elicited with the new participant. At this point any limitations on movement are considered and the safe and effective parameters for exercise to be pursued are negotiated. For example individuals who have had a hip joint replaced will be advised on the restrictions of movement they should observe but will be encouraged to take part fully with the provision of alternative actions. Sheree says how much she appreciates being supported in this way comparing how she feels excluded in a Pilates class she attends.

Sheree (70): I do Pilates and you're mixed with young and old and I found that a lot geared to the younger people than the older ones like me. I do an hour of Pilates and half an hour I'm not doing anything because there are exercises that I cannot do and the young ones are doing it so beautifully and I'm not capable of doing it

Her words cloak multiple feelings about her own body and about the bodies of other members of the class. She expresses admiration for the achievements of younger members and perhaps a little envy. She regrets her own limitations. She seems resigned to the fact that the class should be aimed at the younger members because when Brigitte (78) asks

Doesn't the teacher give you some alternative?

Sheree: No, because she's so involved with it she's just not - There are two or three of us in that group who are not able to do all the exercises. She is brilliant but it's really not 100% for my age group and I find that is not always as satisfactory as this class

It appears that the older members of her Pilates group have internalised social ideals regarding youthful bodies and accept their inability to emulate the performance of their youthful instructor. Relating my findings to Bennett's (2017) work on body conscious emotions, the older women may feel shame about the restrictions of their bodies. They may also feel guilty that their presence, and need for specialised attention spoils the activity for

the rest of the group. Consequently they blame themselves rather than questioning their teacher's management skills. As an experienced yoga teacher herself Brigitte asks

Do you think she's aware?

Sheree: She says this time I'll make it easier but when she makes it easier the younger ones don't like it. It's a problem. That's why I think to have age group is *much* better than having the younger ones mixed with the older ones. (Fri.ETM FG 31/10/14).

The process of negotiating exercise has the added advantage of helping to create a relationship of trust between the instructor and the participant. The body is viewed holistically as part of the identity of the person (Hockey and James, 2003). The exercise session involves notions of partnership. Participants rely upon me and my training as instructor to offer them a safe and effective exercise session appropriate to their needs. I rely on them as responsible adults to listen to their bodies and to make responsible choices about the level of challenge to accept from the alternatives offered. Prior processes of negotiation allow for meanings to be interpreted diversely yet on an individual basis. Between us the exercise session is co-created. The process engenders a sense of belonging to the group which encourages participants to adhere to exercise.

The effects of exercise are to make participants more aware of their bodies. Tricia (65) speaks of how she experiences the benefits infusing through her body during the course of the exercise session.

I was just gonna say that I know it definitely helps becos sometimes when I start I find it difficult to do certain things but by the end of the class I can do it. I can stretch. You know I can't lift my knees up properly but at the end of the exercise class I can do that. So even that hour's exercise has loosened it and made things easier to do so it's definitely worth doing, you know (Tricia, 65 Tues.ETM FG 28/8 14).

Nell, (70 Weds.TC PO 15/10/14) a retired craft teacher who spends a lot of time continuing with her interests in stitching and lace-making knows that she also needs to spend time realigning her hunched shoulders. However she is not aware of the indirect effects of her activity on other parts of her body and on her posture when standing. For others who are less aware of the dominance of forward-focused activities in daily life regular coaching conducted in a general manner to include the whole class is necessary before they become sensitised to opening the shoulder joint when reaching out the arm or consciously relaxing

the shoulders away from the ears. Raising awareness of body deficiencies and correcting postural imbalances acts as an antidote to the effects of time and misuse on the ageing body. As an exercise instructor my position is pivotal in creating body awareness yet it is not the dualistic approach separating body and mind implied in Cartesian philosophy because instructions are always related to functionality and the way that the exercise should (or should not) feel. Thus the mind is continuously engaged in a process of biofeedback. For example exercises to keep fingers and wrists supple are related to practical daily purposes of opening jars or doors. Other instructions relate to 'good' and 'bad' sensations, e.g. the issue of a warning to participants that a specific exercise should not hurt the lower back. Both Sheba (72) in her Pilates class and Sheena (70) in her tai chi class speak of how body and mind are engaged and they are totally transported by their activity.

Gina (63 Weds.P PO 8/10/14) puts into practice the awareness of pelvic alignment and weight transfer that she has learnt in her Pilates class and feels that it has improved her posture and sense of balance. Lucy (67, Weds.TC PO 20/5/15) adopts weight distribution and postural exercises learnt in tai chi when standing for long periods of time e.g. while ironing or washing up, and finds that she suffers less back ache and pain in her knee joints. The examples show how increased body awareness becomes incorporated into daily life, becomes integral to functionality and impacts upon ageing well.

8.5. Benefits of exercise

The intended benefits to health and wellbeing have already been well-rehearsed. It is the purpose of this study to describe them in the context of lived experience not to quantify them as might be attempted in household surveys. Many of the participants in the study engage in other forms of exercise and some of them come to two different classes that I instruct. For example I have already mentioned how Sheena (70) enjoys both the freedom of expression in her ETM class and the calmer contemplative outcomes of feeling at one with her tai chi group. Paulson (2005) observes how different cultures of fitness bring with them specific beliefs about the purpose, value and likely outcome of the movements entailed. Consequently engaging in these activities shapes the subjective experience of growing older. Hermia (57) compares tai chi sessions with Pilates. She reflects upon her raised awareness of embodied action as well as the benefits she enjoys as a result of engaging in the activity.

Erm - I really enjoy Pilates and I really enjoy tai chi although I have to think all the time in tai chi about what I'm doing, what I should be doing and how to do it. Erm - Pilates I enjoy because I feel while I'm doing it that it's doing me good - and I feel while I'm doing it that I'm more *aware* of how I *should* be moving and the fact that it's not just the bits that you see that have to be engaged in the process. (laughter). Erm - afterwards I *always* feel more energised. (Hermia, 57 Weds.P Int. 27/5/15)

I return to Atkinson's (2013) argument that wellbeing is relational and involves time and place. The testimonies above reveal how personal choice and aptitude are part of the interactive co-construction of the wellbeing that is produced as a result of engaging in different forms of exercise. Hermia chooses not to attend ETM and Sheena chooses not to attend Pilates but both women bear witness to the positive outcomes of their exercise classes. Their continued attendance also supports this position.

The beneficial impact of exercise on daily life is revealed by default in the comments made following a break. For example Polly (71, Weds.TC PO 18/10/16), returning to tai chi after a summer holiday lasting almost two months, felt that her balance had become more unstable because she had not been paying regular attention to her posture and weight transfer.

In the same vein, Angie (77) comments more generally on the effects of exercise on her life.

I notice that if I don't do it for any reason or perhaps in the winter if you don't walk out quite so much I do notice that my legs are - stiffer and my joints are not as supple as they are. I can keep everything working better if I - Whenever the sun shines I say to Michael let's just go for a walk - just walk round the Common. Even if it's only for half an hour it's worth doing (Angie, 77 Fri.ETM FG 27/3/15).

In addition there are benefits beyond the corporeal of attending exercise classes. The following set of views chime with Bidonde's (2009) work focusing on the use of exercise to combat loneliness and build new social networks.

Helena: (67) I think if you don't exercise as an older person you lose contact You might lose contact with friends or what's going on in your area - in your community. I think it's a group activity to enjoy - even if you don't feel that you're doing much exercise. You're joining in something. You're talking to other people. So in that respect I think it *is* important. (Fri.ETM FG 20/3/15).

There is agreement that the essential is not to give in to the temptation to stop.

It's too easy to sit down and eat a biscuit – and - have a cup of coffee (laughter) when one ought to get up and do stuff (Linda, 68 Fri.ETM FG 20/3/15).

The aims achieved by attending exercise classes fit into the agenda to take responsibility for the self as established in an earlier part of this chapter. As Helena (67) indicated earlier, the individual is connected through the exercise experience to other people, echoing Atkinson's (2013) view that wellbeing is produced by interaction. Meanings are negotiated and a synergy is produced. Rhona (71) summarises her perceptions of these effects in relation to her choice of exercise class.

You've got to go for something that you enjoy as well as the exercise. I mean I think the class we go to is very nice because *people* are so friendly. It's another way of meeting people and doing your body a bit of good at the same time (Rhona, 71 Mon.ETM Int. 11/3/13).

Central to the production of wellbeing is the experience of positive affect. The evidence suggests that these feelings too are relational, multi-faceted, vary from individual to individual and emanate from diverse characteristics within the exercise experience. Such positive affect has often been referred to as 'pleasure', as 'enjoyment' or as 'satisfaction' resulting from exercise. In the next section I discuss the diverse characteristics and sources of these feelings.

8.6. The nature of pleasure and exercise

In their study of pleasure that older adults experienced from a wide range of physical activities Phoenix and Orr (2014) established a typology which provides a frame of reference for understanding pleasurable experiences that arise from exercise in my study. The four sources of pleasure that they identify relate to sensual experience, to immersion in the activity, the pleasure of habitual action and documented pleasure. The activities researched in my study comprise a much narrower range than those of the Phoenix and Orr study and are restricted to indoor activities which are not conceived as being competitive. In addition they are all group activities in which participants come together to exercise communally though without any intention of forming a team. It is also worth recalling at this stage that participants in AL schemes are obliged to document their progress but take no pleasure in doing so.

The classes occur regularly at weekly intervals over a ten week period with a break for half term. That individuals scarcely miss a week suggests that they experience the pleasure of

habitual action. As Joy announced to the class when I warned them to enrol early for the summer term because there was a waiting list to get in,

Well you know it works because we all come and it's fun (Joy, 76 Fri.ETM FJ 24/2/17).

Others like the routine that commitment to the exercise session provides, helping to create a framework for life.

Catherine (66): I love Monday morning (agreement) because it -

Cara (72): Gets you off to a good start. It does. Yes, gets you going. (Mon.ETM FG 27/10/14).

In the evidence I have gathered there appears to be some overlap between sensual pleasure and that experienced through immersion with the exercise. For example in Pilates the pleasure experienced from working the body and through the body in a calm environment is united in feelings of wellbeing in which the individual feels totally removed from the worries of everyday life. Sheba (72) writes,

Although we sometimes work hard physically, it is a time of mental quietness. Cares and pressures seem to drop away as we concentrate on correct breathing, and the brain seems to rest in a soft cocoon of relaxation. My mind doesn't even wander, and think about a cup of tea, did I turn off the gas or do I need to go to the shops for something as it did occasionally when ringing church bells – sometimes causing me to lose my place in the order of ringing. Pilates time is a time for me and I finish the session feeling a nicer person (Sheba, 72 Mon. & Weds. Pil. FJ 6/2/17).

Yet the state of immersion itself can also be described as having sensual effects.

At the end when I stand up I just feel – ooo - wonderful. My body feels so much better and I realise I haven't been thinking of anything else for the past hour (Sarah, 63 Weds.Pil. Int. 8/2/17).

Sarah's 'ooo' is accompanied by gestures indicating sensual pleasure. The sensations that the two women refer to are reminiscent of what Wellard (2012) argues are body-reflexive pleasures. Similar comments have been made about the experience of performing a lengthy sequence in tai chi. People forget about their bodies but move in a state which some have called 'hypnotic' (Martha, 70 Weds,TC FJ 23/2/17) and others 'mesmerising' (Molly, 65 Weds.TC FJ 23/2/17). Molly also speaks of how feelings of calm wash over and throughout her body as she exercises. Nell, (70 Weds.TC FJ 23/2/17) speaks of being lulled and suddenly becoming aware of where she is and forgetting what point she has reached in the sequence.

She looks to the other participants for a point of reference and to catch up. All the group testify to feelings of synergy, of feeling something embodied and difficult to describe from exercising together as a group. Yet this feeling is something extra, felt through, yet beyond, the body and which they do not experience when exercising alone. In ETM group exercise Angie (77) refers to this extra feeling as 'more than satisfying' (Fri.ETM FG 27/3/15).

Participants in ETM speak of seeking an extra feeling in their exercise by proactively committing themselves to the rhythm of the music.

I like the dancing and I get a buzz from the music (agreement) and prancing about to the music (Cara, 72 Mon.ETM FG 27/10/14).

Central to this experience is that the choice of music should be appropriate to the exercise and appeal to taste as I pointed out in relation to exercise across the life course in Chapter Six. Linda (68) finds the music liberating and says

It makes me feel a kind of freedom while doing it [exercise] and the music takes me back to my youth and makes me feel younger (Linda, 68 Fri.ETM FG 31/10/14).

Time and place are also significant in relation to how pleasure arising from exercise is experienced. Hermia (57) refers to the inviolable sanctity she experiences when performing her Pilates exercise.

In Pilates you're on your own mat which is like your own little fortress in the world and you do what you do within that space (Hermia, 57 Pil & TC Int. 27/5/15).

Hermia's words suggest feelings of empowerment over time and space which reflect Sheba's (72) claim that Pilates is 'a time for me' when her brain rests 'in a soft cocoon of relaxation'.

Time and place themselves are influential in promoting pleasure in group exercise. Participants gather together at a specific time and in a specific place to experience the 'something extra' that they attribute to the experience of exercising in a well-established group. Yet, as the examples above show, the pleasure is experienced at the level of the individual.

Phoenix and Orr (2014) demonstrate how the memory of a pleasurable experience in one location can be revisited and extended by performing a similar exercise experience in a

different location and that anticipation of a future event can add a further pleasurable dimension. Sheba (72) repeats the experience by attending a second weekly Pilates class in a different location. Brigitte (78) says that she always looks forward to her Friday morning ETM class and to sharing the pleasure of exercise with other people.

Brigitte (78): It's socially important as well as physically

Linda (68): Yes, it's nice to be in a group - to belong to a group

Brigitte: It's nice to look forward to coming out and seeing people (Fri.ETM FG 31/10/14).

Meeting the same people in the same place at the same time each week cuts across all categories of pleasure experienced through exercise except that of documented pleasure and highlights the importance of the relational dimension which Gergen (2009) argues is essential for experiencing feelings of wellbeing. Stillman and Baumeister (2009 p.249) emphasise that 'belongingness is an essential factor in creating meaning in life'. The habitual meeting also calls attention to the importance of exercise having a social dimension as well. Linda's (68) experience of getting bored in the gym reveals that place alone, devoid of other valued features pertaining to exercise, can also have a detrimental effect on pleasure. The example of her experience underscores by default the relational dimension of pleasurable exercise.

But you see you're not in a group there. You've got to motivate yourself to get there and you've got nobody to say hello to and have a nice day and what did you do?

None of that, so it's all very insular and I don't like that (Linda, 68 Fri.ETM 31/10/14).

Reflecting on these testimonies to pleasure highlights the multi-faceted nature of exercise experience. Though it is possible to identify different sorts and sources of pleasure that vary from activity to activity and from person to person, there also exists some commonality. The features of exercise in which people find pleasure are intricately interlinked as well as being experienced in an embodied fashion (Humberstone and Stuart, 2014; Sparkes, 2010).

Sheba's (72) writing particularly underscores the links and the complexity. Having already emphasised the feelings of calm concentration and relaxation that she values in her Pilates classes she adds,

A friendly atmosphere, largely determined by our tutor, makes our efforts more like fun than serious exercise despite the fact that our muscles are actually getting stronger (Sheba, 72 Mon. & Weds. Pil. FJ 6/2/17).

While the findings in this case study support Phoenix and Orr's (2014) typology of pleasure a further category emerges that relates to self-discipline or self-compassion as Bennett (2017) refers to it. Chantal (66) gains satisfaction from the duty of care she expresses towards her body by incorporating a strict exercise regime into her lifestyle. She does it to offset the fears arising from her perceptions relating to her genetic inheritance. She expresses a veiled sense of pride in her achievements when she complains about others who continually refer to their failed intentions to take exercise. Her actions reflect Hurd-Clarke and Bennett's (2012) findings that self-care becomes a moral responsibility for health.

8.7. Summary

This attitude is also apparent in the approach to engagement with exercise taken by those who have recently retired. It is also the approach which government policy attempts to foster in shifting the responsibility for health and social care onto the individual. However national government's exhortation to 'age well' misses the more rounded aspects of this concept. As Quéniart and Charpentier (2012, p. 1003) argue, ageing well is 'a dynamic experience that brings into play a range of socio-historical, cultural, symbolic and identity-based factors'. Policy does not take account of subjectivities nor individual differences. Commercial attempts to attract people into exercise often suffer from the same reductionist approach. For example Sassatelli (2014) remarks upon the role of competition and variety in ensuring that clients return to exercise regularly. Neither of these worked for Linda (68) who cancelled her leisure club membership because she was bored. Tamminen and Bennett (2017) point out that the significance of events and an individual's response to them both become central to emotions experienced. Put otherwise, emotions, both positive and negative arise from events that are meaningful to the participant (Lazarus, 1999; Feldman-Barrett, 2006; Gross, 2008). Lazarus (1999) argues that people construe the significance of what is happening for their wellbeing and what might be done about it.

The assumption that some activities are intrinsically pleasurable provided one of the starting points for an exploratory study by Cabrita et al. (2017) but the findings revealed the diversity of individual differences and recommended further research into subjective

experience from a lifestyle perspective. Diversity of pleasure has been shown to be manifestly significant to the participants of this case study. I argue that pleasure does not exist independently but that it is co-created every time that people come together in an exercise class. How this happens will be explored in greater depth in the next chapter.

This chapter has dealt with the perceptions of ageing and exercise with particular reference to agency and resilience. I have organised the data in a way that is intended to reflect an increasing sense of agency expressed towards the body and how this interacts with society. I have moved from a position of how self and ageing are interpreted through meanings attached to responsibility and how this is framed in response to perceived challenges that accompany later life. I argue that ageing well is a dynamic process which resists standardisation. Individuals display agency and resilience to disparate biographical challenges. But adjustments in lifestyle and negotiating changes in identity are shaped discursively within the context of social environments.

The position of the body is integral to processes of transition, though it may often be regarded as 'absent' (Oberg, 1996) or taken for granted (Frank, 1991). Crossley (2001) contends that the relationships that we have with our bodies develop over time and in accordance with social meanings, values and norms. Tulle and Krekula (2013) highlight the centrality of the body to existence. They describe bodies as 'the dynamic receptacles of our existence' which are 'tied up with our deepest sense of self' (Tulle and Krekula, 2013, p. 8). When the body is foregrounded in exercise classes the body awareness produced can filter imperceptibly through to everyday life with beneficial effects. I have attempted to show that, congruent with Tulle and Krekula's (2013) notion of the embodied self, engagement with exercise is a multi-faceted endeavour which is not restricted to the corporeal. I have shown that it is important for participants to feel that both body and mind are engaged and that they should find their exercise experience satisfying, purposeful and suited to their preferences and abilities. Co-construction which takes account of social and cultural factors and a negotiated approach provides the medium which binds people together in their exercise groups.

Consequently I return to perceptions of the ageing self to show how the body relates to these perceptions. I situate these perceptions in the context of socially constructed exercise

sessions where agency is demonstrated. Finally I discuss the centrality of affect to the experience of exercise and how this relates to the perceived benefits of exercise. The next chapter examines more closely the characteristics of the exercise class and the teaching and learning strategies that support the production of a satisfying experience.

Chapter Nine: The Context of Exercise

9.1. Introduction

In the last three chapters I examined participants' experience of ageing and exercise. In Chapter Six I examined current experience and related that to the responsibilities and challenges that occur with ageing in Chapter Seven. Chapter Eight took a life course perspective. I now seek to contextualise participants' experience by exploring the environment which surrounds their current classes. The significance of pleasure, enjoyment or satisfaction in exercise forms a prominent theme throughout the data. It often occurs linked to specific features of the exercise class where the activity could make or mar the experience

Early in the research it became clear that the reasons for participants' engagement with exercise were complex and diverse. The last chapter demonstrated the rich panoply of life course experience which precedes current engagement in the exercise groups studied. The notion of entelechy implies the shared experience of common themes such as the rise of consumerism and the changing political climate, but the picture is further heterogenised by variables such as class, ethnicity, gender and social capital as well as physical attributes discussed in the last two chapters. The action of coming together in an exercise group suggests that some common themes are sought or eschewed and then further shared as the exercise experience is socially constructed.

The findings gravitate towards describing the valued characteristics of the exercise class to which explanations of how and why older adults exercise are linked. The word 'package' frequently occurs to refer to this idea. Also predominant is the idea that the exercise experience should be pleasurable and the implication that this effect is co-constructed in partnership with the instructor and the other members of the class. Exactly how pleasure is experienced varies but these themes are common to the three cultures of exercise studied, regardless of specific differences e.g. relating to reasons for choosing tai chi instead of keep fit. For the class to be effective the predominance of these themes as a feature of group exercise further points to the need to identify how pleasure is fostered. The exploratory endeavour indicated is reminiscent of the work of Black and Wiliam, (1998; 2001) who probed the 'black box' of the curriculum in an attempt to identify the factors influencing educational achievement. The opacity of the box symbolises the difficulty of distinguishing

what happens inside it: only the outcome is clear. I employ the motif of the package to open up the 'black box' or 'package' calling attention to the similar position of the exercise experience and identifying the features which are most significant to older adults

Some generic components of the package can be easily identified e.g. accessibility of the exercise venue; appropriate level of challenge, but most are relational or processual, requiring close observation and interpretation. For this reason I draw on the assumptions made about how adults learn as defined by Knowles (1980) in his study of andragogy and summarised in Figure 4 (below).

The purpose of my study is to investigate how exercise relates to perceptions of ageing with a view to discovering implications for improving provision and attracting older people into exercise engagement. By mining my data to identify the contents of 'good' and 'bad' packages, or what features of exercise sessions matter to people, I attempt to delineate how this purpose might be fulfilled.

The chapter explores in an incremental fashion the factors which characterise the class, moving from those which are easiest to understand, sometimes by default, to those which can only be interpreted by closer observation and discussion. It terminates in a discussion of additional, less attractive, features incidental to the administrative structure of the exercise provider. How these factors are managed provides further evidence of the social construction of the class and highlights the role of the valued features of the class that are discussed in the earlier parts of this chapter.

Figure 4: Andragogy: 'the art and science of helping adults learn' (Knowles, 1980, p.43).

Some materials have been removed from this thesis due to Third Party Copyright. The unabridged version of the thesis can be viewed at the Lanchester Library, Coventry University.

9.2. Features of the Physical and Social Environment: the contents of the 'package'.

Many of the features which are clearly evident for their relationship to space, sight or sound are important because of the way that people say they feel; the meanings that such features have for people or the way that people interpret them. For example proximity of exercise venue becomes particularly significant for those who do not drive but it has an additional social benefit for participants in that they are likely to meet other local people at the exercise venue whom they may encounter in other settings. That many of these venues are church or village halls means that people may already have attended other events held there. Familiarity of place thus has the effect of helping people to relax and feel comfortable.

In contrast the literature is replete with instances of older people being put off by the unfamiliarity of the sights and sounds of the gym (ARCO, 2015; Allender et al., 2006; Sport England, 2006). The data here support these findings.

Many of the participants in my classes have never been to a gym or a leisure centre but have strong perceptions of the alien atmosphere they would be likely to encounter through the power of social discourse or from representations in the media.

I've *never* wanted to go to one of those places. I wouldn't know what to wear for a start and I'd feel totally out of place (Janet, 61 Thurs.ETM Int. 9/11/16).

Coming from a family in which sporting prowess was valued Janet compared herself unfavourably and was only eventually persuaded by her neighbours to try out their local community ETM group when she retired. She is astonished by her own change in attitude; that she finds the class pleasurable and is loath to miss a session. Her family are impressed by her increased fitness and are pleased that she has found a form of exercise that suits her.

My participants often perceive the gym to be populated by people fitter than themselves and wish to avoid comparing their bodies by wearing lycra which they perceive to be essential gym clothing.

I was quite concerned that everybody else would be much much fitter than me - er - probably much much younger than me and much much thinner than me and I don't know whether that's a common thing but, you know, you look at your former self and the person - the body you inhabit now and the two, in my case, are very, very

different and that doesn't mean that I want to go back to how I was before but I would like to be fitter than I am now and I think sometimes it's, for *me*, it's easy to be put off (Hermia, 57 Pil & TC Int. 27/5/15).

Those who have been gym or leisure centre members in the past complain especially of the boredom which emerges from repetitive exercise routines and the lack of social interaction.

I used to belong to a gym and I found that so hard to go along and do it by yourself (agreement). You're not in a class you see, and you would just go and do that awful thing and I would swim and I would think 'Oh, this is so *boring*' (Linda, 68, Fri.ETM FG 31/10/14).

Others have been intimidated by 'being shouted at' as they perceive it, through the medium of a head microphone used in large commercial keep fit classes at leisure centres. Practical problems associated with this form of address also cause feelings of frustration. For example Charlotte (64) complains about the use of very loud music with a head microphone and the difficulty of hearing instructions clearly above the level of the music. Volume control is a feature that most of my participants feel sensitive about. Low level sound provides an important accompaniment to Pilates and tai chi sessions for establishing an atmosphere of calm but ETM participants also appreciate modulated music so that they can respond to the beat but can also hear instructions as necessary.

Carmen (63) sums up the attitude of ETM participants when she equates the use of a head microphone to the feeling that she is being shouted at, as if she were doing something wrong, or the feelings of 'being pushed' beyond the level she wants to work at by the coaching of overenthusiastic instructors. Conducted in this way, she says, the exercise session appears to be 'regimented' and the atmosphere becomes more intense and impersonal.

I think with exercise or keep fit or whatever you want to call it, you've got to have some fun in it. If it's too regimental then it's - it gets too much - the same - predictable (Carmen, 63 Thurs.ETM FG 21/3/13).

Jemima (68) insists that she would no longer come to the group if she were treated in this way. She says forcefully

That's one of the reasons that I come - to try and keep fit - and for the fun of it. If there was all this 'Oh you didn't do that right, you didn't do this right, I wouldn't be bothered. I wouldn't be coming (Jemima. 68 Thurs. ETM FG 21/3/13).

The rest of the focus group relate the idea of being 'treated like soldiers' to 'being pushed' which is not contiguous with their rationale for attending the session.

In other groups people suggest that young, fit instructors may not appreciate the restrictions that older bodies experience. For example Rhona (71) says that she stopped going to aquarobics because it was too hard work.

The teacher shouted 'Are you all right?' when I stopped because I was just too tired to carry on (Rhona, 71 Mon.ETM 11/3/13).

Rhona regrets that her instructor made little attempt to understand her situation. Being shouted at made her feel inadequate and unwilling to rise to further challenges.

Stella (66) agrees with this point of view when she says

Some classes have over enthusiastic keep fit leaders dressed in lycra and make you feel guilty for not being good at it (Stella, 66 Fri. ETM FJ 10/3/17).

Sheree (70) understands the purpose of having an aspirational role model in the instructor or as often portrayed in adverts but considers that the effect is discouraging when the difference is so great that bridging the gap would be unattainable, She comments on another Pilates class that she attends.

I do an hour of Pilates and half an hour I'm not doing anything because there are exercises that I cannot do and the young ones are doing it so beautifully and I'm not capable of doing it (Sheree, 70 Fri.ETM 31/10/14).

As a result she recommends that there should be classes that are more carefully attuned to an older age group led by instructors who are more like herself and able to appreciate what it means to inhabit an older body.

Older adults do not want to display the effects that ageing might have had on their bodies and so are reluctant to be reminded of their former selves embodied in the excessive dynamism of a fit, young instructor. Paradoxically, however, when older adults demonstrate a fit persona it is easy for the instructor to misjudge abilities unless some form of dialogue has preceded the exercise experience.

Cara (72) speaks of an instructor's inability to communicate and manage effectively the pace of a new exercise group. Cara, who likes to try new exercise classes, saw the group

advertised as 'Body Forming' on a lamp post in the village and thought it would be more a Pilates type of exercise. She says,

It was just aerobics and it was just so hectic for an *hour* ...and the teacher kept saying, 'Anybody's had enough you can sit down, you don't have to keep going' and I thought 'Well, I'm the oldest one here. *I'm* not gonna be the one to sit down - and it was so - and the actual title didn't - to me - didn't say what the class was about so I just thought 'No-o' (Cara, 72 Mon.ETM FG 23/3/15).

Having attended many exercise classes throughout her life Cara was dubious about the safety standards involved in this class caused by the instructor's apparent naïveté.

It was so manic doing it. You didn't know whether you were doing it correctly and the exercises on the floor were really difficult and I thought, 'No, I shall end up doing something, you know, wrong..' (Cara, 72 Mon.ETM FG 23/3/15).

Just as Cara did not want to call attention to herself in this class others, like Rhona (71, Mon.ETM Int. 11/3/13), resent being 'shouted at' or identified as needing special attention. A member of my Pilates group, Gina, (63, Weds.Pil. FJ 4/3/15) tells a story about being singled out and having adjustments for movement shouted at her from across the room by the instructor of a group she once attended. She says she immediately vowed never to go back to that class again. Stillman and Baumeister (2009) argue that the sense of rejection that this entails renders the exercise meaningless.

Rhona (71) sums up the effect when all these feelings mesh:

You don't want to come home feeling you don't like yourself very much. I'm unhappy to feel incapable because the instructor is very fit (Rhona, 71 Mon.ETM Int. 11/3/13).

None of these experiences reported above embody the pleasurable feelings associated with exercise that have been so highly prized in the findings. Conversely, high in the list of factors that people find unacceptable is the feeling that the instructor seems unable to relate to the capacities for exercise of older people. This finding emphasises the importance of identifying how such relationships are fostered for the promotion of 'good packages' comprising the comfortable, friendly, non-judgemental ambiance reflected in the data.

The examples quoted above show a distinct contrast between the desired ambiance and the pervasively authoritarian or alien atmosphere that some of my participants have previously experienced. Reina (65) points out one of the conditions that help her to feel comfortable.

You never pick on anyone or tell anyone they're doing it wrong. It's always positive.
(Reina, 65, Fr. ETM FJ 28/4/17).

The qualities of the atmosphere established in the room take on cultural significance through the eyes of Uma (74) a British born Indian who recently joined the class. She emphasises how much courage it took her to join a keep fit type exercise group. Being Asian she has always been worried that it might be difficult to fit into an exercise group or to mix with other group members who, she says, are more likely to be European. She says that there are many activities which women in her community understand are inappropriate for them to do. Her words reflect concerns expressed by the women in a study involving British Asians (Jankowski et al. 2014).

Many women in our community hesitate before joining an exercise class. Sometimes they're worried about their English, being able to understand or get on with the others in the class. Or daughter-in-laws are concerned about how their husband's parents will react (Uma, 74 Fri.ETM (FJ 17/3/17).

Using examples from her own work in the health service she reveals how working with families and explaining the need to change behaviour can have some effect. As an expert in diabetic care she is concerned about the impact of perceived exclusion from appropriate exercise on the female Asian community. During her visits to diabetic older women in their homes she attempts to breach barriers to engagement with exercise rooted in cultural beliefs and perceptions of ageing. De Vries (1990) argues that cultural aspects intersect strongly with learning. Even more important than self image is the impression that women believe they may project to others in their community and the fear that they may court censure. Uma signals the importance of reassurance and building confidence when transmitting health messages about the importance of exercise. She highlights the absolute necessity of feeling comfortable with the instructor and with other members of the group.

But it's OK here. People are friendly. I still don't get it right [the exercise routines] but it doesn't matter (Uma, 74 Fri.ETM FJ 17/3/17).

Many other participants express feelings about the importance of being able to relate well to the instructor, of not feeling intimidated or lacking in ability, and of the supportive atmosphere that is evoked in the class.

The offer of optional challenges enables people to work at a level that they find comfortable. Many people express their appreciation for being able to work at a pace which is suitable for them and to be able to vary their response in accordance with how they are feeling.

Brigitte (78): It's nice to feel able – like Wanda (77) today with her bad knee – to just sit out (agreement) and, you know, not feel noticed (agreement) No, nobody's judging you.

Linda (68): you don't have to stop. You know, you can just do it a bit slower. And some days you feel better than others, don't you. You know, some days you feel more energetic and you think 'Oh yes, I can put my heart and soul into it' and other days you think - um - you know - I feel a bit – erm - sluggish (Fri.ETM FG 17/10/14).

Thus they are able to listen to their bodies and so express competence in their activity through their ability to feel in control of it. Sometimes the confidence is expressed in terms of not worrying about making a mistake.

And it's a very friendly class so it's very sociable (agreement) I mean I'm not one to go to the gym cos I like to get out and meet people and - that's what's so nice about it, you know. And I don't think anybody feels intimidated because we're all bad at doing routines (laughter) (Sheena, 70 Fri.ETM FG 17/10/14).

The laughter at the end of this quotation emphasises not just the frequency with which mistakes may occur but that the comfortable atmosphere within the group allows those mistakes to be marginalised and to be dismissed lightly as part of normal proceedings involved in the learning process.

The response also highlights a feeling of solidarity amongst group members, of shared experience and compassion for one another. Janet (61), the recent newcomer to the community ETM group, called attention to the importance of feeling comfortable enough with the group to be able to make mistakes without embarrassment and to incorporate the mistakes into the learning process. She referred to our exploratory phone call which occurred previous to her decision to join the class.

When you spoke to me on the phone you said 'No one will think any less of you for making a mistake'. Until then I hadn't realised that that was what I was worried about and I'm glad I joined because it's O K. *You* even make mistakes! (Janet, 61 Thurs. ETM FJ 28/4/17).

During my training as an exercise instructor I was told never to admit to making a mistake but I have found that the admission of fallibility is much more productive in building successful teaching and learning relationships. By default it promotes the feeling of shared aims and the social bonding which emerges encourages adherence to the exercise group.

Some respondents pointed out the importance of there being a social side to exercise.

You've got to go for something that you enjoy as well as the exercise. I mean I think the class we go to is very nice because *people* are so friendly. One of the other ladies said to me this morning 'Oh, we're like a sports' social club now' and I thought well, yes, it *is* like that as well especially when you're new to an area as I was when I first came to the club. It's another way of meeting people and doing your body a bit of good at the same time (Rhona, 71 Mon.ETM Int. 11/3/13).

Exercise classes can be instrumental in meeting the need to form new social networks following life events such as bereavement or retirement. For example Dorothy (84) who had already tried several AL classes and who was more interested in what she had heard was a friendly and enjoyable experience offered through the ETM class rather than pursuing knowledge of computing or learning a language.

So that's why I came. To get out of the house, I suppose (Dorothy, 84 Fri.ETM 17/10/14).

Knowles' (1968) argues that changing social circumstances are closely related to learning needs. For Dorothy the need to create new social networks is closely allied to the need to learn to cope with the status of widowhood and dealing with being alone in the house. She has now been a member of the class for over ten years because she says she finds it enjoyable. Her views also reflect Knowles' contention that the learning of adults is internally motivated and not directed by external pressure.

Cara (72), who was already a member of an exercise class when her husband died, found that the friendships she had formed in her exercise class supported her when she was widowed. Subsequently the classes became part of her strategy to forge a routine and to have some sort of social activity every day.

The other members of her ETM class which meets at 9.30 on Monday morning support her view that the class imposes a good start upon their week. (Mon.ETM FG 27/10/14).

Other groups spoke of the importance of 'belonging' and demonstrated their affiliation after the exercise session by going for coffee or having lunch together. Members of Rhona's class refer to their class as a 'club'. As groups become established other collective activities emerge such as charity fund-raising or theatre visits. There can also be many supportive spin-offs related to ageing though not necessarily related to exercise. Especially in smaller classes members feel secure enough to be able to broach matters which worry them. Such an occasion at the end of a Pilates class allowed Chantal (66) to express her fears about encroaching deafness which eventually led to her managing the situation in a more informed manner.

In summary of this section, practical issues pertaining to accessibility and quality of venue may constitute fundamental features of the 'package', but beyond those the atmosphere of the exercise class is socially constructed. Older adults need to feel comfortable and confident about their ability to rise to challenges presented. The phenomena that emerge have their roots in what participants describe as 'partnership' in exercise amongst themselves and their instructor and it is this partnership which acts as the vehicle for producing pleasurable outcomes. I argue that partnership is accompanied by mutual respect which allows participants to act autonomously. Much of this depends upon or arises from the sensitive use of teaching and learning strategies. I draw on the principles of andragogy and its underlying assumptions about how adults learn to discuss how partnership is achieved.

9.3. How the package is created and maintained

Mutual respect lies at the basis of ideas about partnership. Participants arrive at the exercise session expecting to be able to respect the knowledge and expertise of the instructor. At their first exercise session the expectations are borne out in the one-to-one discussion of the PAR-Q. This discussion, in turn, provides the instructor with guidance on how best to support participants in the exercise class. The information gathered at that point enables the instructor to offer suitable alternatives during exercise sessions but the source of the instructor's respect for participants lies in the belief that only the individual concerned possesses expert knowledge about what it is like to inhabit his/her body. Thus the individual is best placed to make an informed decision about what course of action to take in any exercise session. Advice is provided but by being encouraged to listen to the changing

state of the body the participant is in control of choosing the level of challenge that is appropriate at any one moment.

Strategies used to support this process vary with the culture of exercise. In ETM alternative movements are suggested e.g. walk, march or jog; higher or lower armlines or none at all. In tai chi adaptations are suggested e.g. extra steps for people whose knees are stiff and find it difficult to turn smoothly, or the option of performing movements from a seated position. In Pilates a layered approach to challenge is presented, starting with instructions for the most basic movement and adding progressively more strenuous adaptations with points to watch incorporated into the instructions to prevent people from becoming too ambitious and risking injury.

Instructions are explained in the context of lifestyle situations. In this way existing experience is recruited for awareness to be raised and learning to take place so that exercise is seen as meaningful (Knowles, 1980, point 2, see Fig. 4, P.183). An example of this technique would be to refer to how our forward leaning culture that involves driving cars and sitting at computers encourages us all to have round shoulders which, in turn, can create neck pain. Consequently we focus on consciously relaxing and toning those parts of the body. My approach is to coach generally, calling attention to areas of the body that tend to get forgotten when the focus is directed elsewhere. In this way everyone thinks that I am addressing him/her individually and responds appropriately. Jeanine (72) says

I can't see you when I'm lying on the floor but I always think you're talking to me and check whatever it is that you say (Jeanine, 72 Weds.pil. FJ 23/3/17).

No one is ever publicly singled out to feel incapable or rejected. If an individual is in danger of causing harm to him/herself by the action s/he is performing I lie on the floor by his/her side and do the movement with him/her. Partnership in this case unites action and dialogue on a personal level. Careful observation of participants' reactions builds the relationship as well as the expertise. By ensuring that people are in charge of their activity they are not only able to demonstrate autonomy over their exercise but they are able to move competently and with confidence. Memory of a satisfying experience encourages people to want to repeat it (Wellard, 2012; Phoenix and Orr, 2014) as Daisy (67) indicated,

And also how it makes you feel afterwards, cos obviously it gets the old endorphins going and then you feel good and therefore you want to repeat that (Hm) There's nothing like feeling - (laughs) (Daisy, 67 Fri.ETM FG 17/10/14).

As can be seen from the examples above the way that information is transmitted is important. For example the technique of 'layering' information allows people to take in a little at a time and to build up their understanding as well as their ability to respond. Theory can also be useful in explaining how specific actions relate to daily functioning. I regularly provide participants with reasoned explanations for our activities as part of the coaching process and make a point of conveying salient points of recent research whenever it is relevant to our aims and interest, for example the beneficial effects of exercise for memory (Fotuhi, 2015). Often participants contribute to the discussion from items that have appeared in the news. The subtle, complex knowledge base which accrues from this partnership can be recycled and applied in teaching and learning strategies. The depth of understanding produced is embodied in the way that such strategies are honed for further effectiveness. For example I recall being advised during my training as an exercise instructor that I should never admit to having made a mistake. Yet I have no reason to want to feel superior to my participants. We are in this together. Besides they love it when I make a mistake because it makes them feel better about making mistakes themselves. I am able to encourage them applying Sartre's (1954) philosophy that no two similar experiences are ever the same. I apply the importance of creativity in keeping the brain active (Fotuhi, 2015), tell them that they are being creative and growing new neurons in their hippocampus. We know that the logic may be slightly faulty and the science slightly garbled but the point is that we share the aims as well as the errors in our exercise and in making light of the errors we are able to enjoy our efforts. We are complicit in the way that we use knowledge for our own purposes to produce the desired effect. Such knowledge can be applied to our classes and recycled to optimum effect in serendipitous situations.

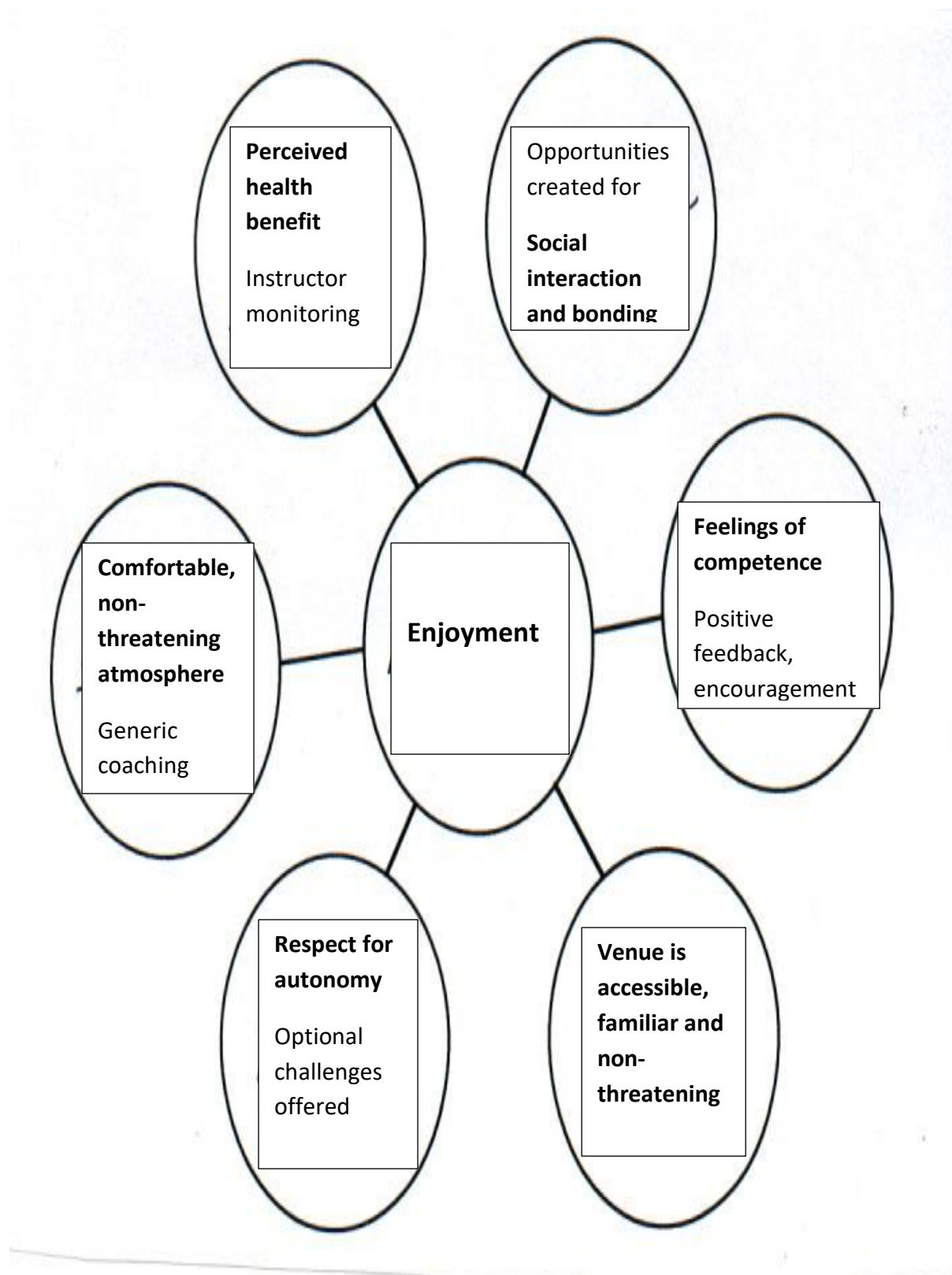
This deeper level of engagement might not have been possible before I embarked upon the study but the teaching and learning strategies which promoted such understanding are still likely to have been effective in promoting adherence to class. Indeed not all of our exchanges during the course of the class enjoy such erudite groundings. Some are more akin to the jokes found in Christmas crackers but they focus on exercise as a relational, interactive pursuit. They are vehicles for social bonding and produce entertainment. They

aim to create familiarity, co-constructing meaning and building the confidence which inspires participants to confront more ambitious challenges. Participants recognise these effects as features of a partnership whereby members of the exercise class strive to achieve their collective and individual aims. It is one more example of how exercise is itself processual and adds to the process of becoming an older self.

Figure Five (P. 195) summarises how the contents of the package are constituted by teaching and learning strategies used. In other words these are the processes which occur inside the 'black box'. The findings suggest that the particular teaching and learning strategies I adopt provide, for the most part, a pleasurable experience for participants. Salient features of the package are shown in bold and linked to teaching and learning strategies shown in normal type.

I now discuss how less attractive elements of the exercise session as provided under the auspices of AL are managed. These centre upon the meanings ascribed to exercise and how quality is judged.

Figure 5: A diagram to show the generic factors of the package and how they are constituted through particular forms of teaching and learning strategies.



9.4. The Meaning of Quality

Whereas the components of the exercise class which participants find most meaningful can be negotiated the rigid administrative procedures determined by classes run under the auspices of AL cannot and are often the cause of dissent.

In Chapter One I contextualised the research highlighting the administrative procedures required in running an Adult Learning class. Many of these seek to objectify and quantify progress in physical activity in the manner which Grant (2008) identifies in a study comparing common philosophical underpinnings of physical activity with the meanings that people over 70 years of age attribute to their exercise. Grant (2008, p. 818) reflects 'When objectifying and quantifying physical activity we often lose sight of the lived body'. The conclusion that he draws from his work with older adults echoes the meanings which my participants attach to exercise. For them 'meanings and movement are inextricably bound and provide an alternative reality about older adults' experience with physical activity' (Grant, 2008, p. 818).

The need for AL to demonstrate accountability for its grant from the Learning Skills Council is expressed in a number of ways, many which require participants to quantify their progress in the manner that Grant (2008) warns against. Consequently the meaning of progress in exercise in AL classes becomes a contested issue. When asked their reasons for enrolling in an AL exercise class, most participants respond with an unqualified version of 'to stay fit and healthy'. Consequently there is a mismatch between how participants perceive progress and how AL requires it to be monitored and recorded. The quantitative, evidence-based approach expressed in RARPA (recognising and recording progress and achievement) conflicts with the lifestyle improvements that are privileged by the participants. At the beginning of term participants themselves are required to set SMART (specific, measurable, achievable, recognisable, time-related) targets in their Independent Learning Plan (ILP) which they aim to achieve by the end of a series of ten weekly one-hour long exercise sessions. The targets are then revisited at the end of the term and the tutor is required to comment on progress. Not only does the RARPA process erode the time for exercise but it does not mesh with participants' own reasons for engaging in exercise nor their interpretations of progress or their former experiences of assessment. Tricia (65) voices her confusion.

I can't be doin' with this self-assessment business. I wasn't brought up with it. The kids today are all used to it but it's meaningless to me - wrong. I just want *you* to tell me if I'm doin' it right an' if I've improved (Tricia, 65 Tues.ETM FG 15/3/16).

Tricia takes pleasure in having her achievements recognised by her instructor. By comparison Joanna (83) takes pleasure in the action. She could see how improvement might be represented in terms of competition but was moved to discredit its importance for herself. She compared the way that she felt about her exercise class with her experience of playing table tennis when she was younger.

I never cared about winning. It was just fun. I'm not competitive I just like doing it (Joanna, 83 Tues.ETM FG 15/3/16).

Besides, apart from those enrolled in beginners' classes for tai chi and Pilates, participants do not expect to be able to demonstrate overtly the outcome of 'learning'. Rather, the experience of their classes is embodied and impacts upon their everyday lives.

Curiously it is the irritations caused by the incursions of administrative practices that serve to elucidate the meanings that participants attach to progress in exercise, the underlying purpose of their engagement.

It has to be fun! Where's the fun in this? [paperwork] (Helena, 67, Fri. ETM, 15/12/17).

Participants comply with the AL monitoring procedures by adopting a pragmatic approach. Successive attempts to review the Independent Learning Plan (ILP) (see Appendix B) to make it appear more compatible with notions of maintaining health; improving body awareness, balance, posture and ease of movement, or managing pain through exercise, still focus on the quantification of progress. Learners are quick to realise that they are required to record improvement over the duration of their course and comply by regularly assessing their skills at a low level in September, record a slightly higher level by Christmas and the highest level in July, only to start the process all over again in the following September. Their perceptions of the process as meaningless produce equally meaningless data.

That's what they're expecting us to do, isn't it? (Angie, 78 Fri.ETM FJ 3/10/14).

In terms of the 'package' or 'black box' AL monitoring requirements deal only with inputs and outputs, not with the contents which is what exercise participants actually value. Not only does this create disruption to the teaching and learning process in the class but it does

not give any understanding of how a beneficial exercise class is created and made available to participants or how they perceive it.

A further anomaly tends to invalidate the data gathered by RARPA. The volume of paperwork at the beginning of term is so great that administrative staff charged with the task of placing the documents to be dealt with in the register and processing the completed documents spread the burden over two to three weeks and sometimes more. Thus time allowed for exercise suffers over several sessions and learners may not be identifying their starting aims until the third week of a ten week course – not that this bothers them. The primary focus from the perspective of AL remains the need to reduce all experience into quantifiable form where quality too can be represented as an integer. Biesta (2010), comments that measuring educational progress has become a managerial issue which is unrelated to knowledge acquisition. By comparison my data attempts to highlight the values and beliefs which underlie participants' engagement in AL exercise sessions and to identify what really matters to the participants of these exercise classes. Thus I uncover the 'package' itself or open up the 'black box'.

However, the administrative processes cause them to question what they are doing and why they are doing it. Instead of setting and aiming to meet SMART targets the intrinsic meaning of progress for participants is disposed in feelings of satisfaction and the embodied differences they feel as a result of the exercise session; that as muscles warm up, movement becomes easier and joints become more flexible. Increased cardio-vascular flow has an impact on the sensations of wellbeing.

I was just gonna say that I know it definitely helps becoss sometimes when I start I find it difficult to do certain things but by the end of the class I can do it. I can stretch...You know I can't lift my knees up properly but at the end of the exercise class I can do that. So even that hour's exercise has loosened it and made things easier to do so it's definitely worth doing, you know (Tricia, 65 Tues.ETM FG 28/8/14).

As I have shown participants respond intuitively to the administrative procedures, resenting the erosion of time for exercise that administrative matters impose. People who have been repeating the course for a number of years and do not see themselves as athletes preparing for competition find it difficult to envisage improvement numerically. They find the format irrelevant and resent its intrusion into the time allocated for their exercise. Dialogue and a

sound relationship with the instructor are crucial in finding ways to minimise the time commitment necessary for managing administrative procedures and to avoid breaches in confidentiality. There is still grumbling about time wasted but generally the paperwork is dismissed as an irrelevance or tolerated as a necessary evil of the AL administration. The more polite comments revolve around 'What's this one all about then, Sue?' and 'What do you want me to do now?' Though I encourage people to read things they invariably just say 'Where do you want me to sign?'

It is the lengthy forms associated with the enrolment process and the termly requirement to sign learning agreements containing a substantial amount of confidential information that annoy participants most. None of the details have a bearing on the chosen course and in this age of heightened awareness regarding data protection some participants feel threatened and others affronted by the requirement to disclose so much seemingly unrelated personal information. May (64), a former solicitor, tried to allay fears by telling colleagues that the document had no legal status. It could not be conceived as an agreement because it was imposed and so was probably just an instrument for audit purposes rather than a contract that was binding. There was still disquiet amongst participants as to who reads these documents and what happens to the plethora of paper produced. The so-called agreement is not characterised by a partnership involving mutual responsibilities or obligations and it provides no guarantees or attempt to frame the exercise class as a commodity sold to a consumer. 'Customers' pay the advertised course fee plus an administration fee. They are expected to complete the course and are asked to account for their absences. However they are not reimbursed if they later find that the product is not fit for purpose or they are unable to avail themselves of its benefits e.g. if they fall ill and cannot attend class.

While these arrangements have little to do with the actual processes of exercise their existence is pertinent to this study for the following reasons. People who tolerating the exigencies demanded, especially people who attend year after year, shows that they place value upon the end product received. Furthermore, the administrative costs entailed in processing these documents is reflected in the cost of the course. Hence AL exercise classes are not cheap. Publicity material states that courses are subsidised by a grant from the Learning Skills Council but a course has to attract a minimum of nine enrolees before it

becomes financially viable and is allowed to run to full term. The costs and conditions of having to pay for ten sessions upfront for a product whose qualities may be unknown to a newcomer are at the least inhibitive and possibly prohibitive to those of limited financial means. In this respect AL exercise classes do little to support health promotion policies aimed at reducing sedentary behaviour. Yet current participants of these classes continue to find their AL provision worthwhile and are concerned that reorganisation might lead to them being withdrawn. They demonstrate their views by their continued affiliation despite the offer of cheaper community-based classes which have become available in recent years. Their continued attendance emphasises the importance of familiarity, a comfortable atmosphere and social bonding that emerges from the data. It appears that they have found their 'package' and do not wish to abandon it.

Possibly there are advantages to being able to pinpoint sources of negativity. Though not an ideal situation, the dialogue involved in managing these situations fosters social bonding as people are united in adversity against a common source of discontent. Their willingness to confront frustrations and to deal with them summarily and pragmatically, serves to cast light on what is really valued in the exercise class. However the quality of the audit data produced under such conditions becomes questionable for its validity. The circumstances of its production and the lack of coherent meaning that it contains do not furnish a sound basis for policy generation.

However, it should be noted that AL courses have always had a reputation for quality and the competence of their tutors. When Hermia (57) retired she believed that the AL exercise classes in her local village hall were the obvious place to go.

I went through adult education because I felt fairly safe in that I thought there'd be some quality control that the instructors would have to have a certain level of competence that may not be the case if somebody's setting up a class in a village hall independently (Hermia, 57 Pil & TC Int. 27/5/15).

The complex administrative procedures and monitoring are aimed at ensuring that this quality is maintained. The requirement to pay for ten sessions in advance is also a spur to commitment to the course and is conducive to promoting adherence to exercise and social bonding. There is a built-in ambivalence to AL classes but, in the case of the participants in this study, the advantages appear to outweigh the irritations which can be managed and

marginalised by the same processes of negotiation that contribute to the success of the exercise class.

9.5. Implications for provision

My research has shown that participants in group exercise classes want to enjoy their exercise experience and to feel that it is doing them some good. They are deterred by anything which they believe to be irrelevant or which undermines their confidence. In AL classes time is compromised through the need to deal with what participants regard to be irrelevant paperwork. In consequence the class and the instructor are united in adversity with the resultant strengthening of the relationship. Participants could escape these annoying procedures by exercising at a gym or leisure centre but there are qualities in the AL experience that are prized and which serve to offset their irritation with paperwork. However we are aware that recreational classes are in the minority of AL courses which are predominantly vocationally inspired and welcome the attempt to reflect the difference in the new ILP even though we regard it as flawed. Funding from the Learning Skills Council and a new administrative structure involving the subsumption of AL by Further Education Colleges creates fears that the future of AL recreational courses is uncertain. Reorganisation belies an attempt to improve administrative efficiency and cut costs so it is unlikely that attention will be afforded towards improving quality assurance procedures for exercise classes. Yet the mere excision of meaningless paperwork would reduce administrative tasks and cause the application of the funding to be more cost-effective.

However, following information made available at staff meetings, some AL colleagues are concerned that recreational classes may no longer be provided by the new authority. In this case current participants would have to consider alternatives. Whether they are able to find classes that suit them is dependent on the ability to fulfil the criteria which drove their reasons for choosing AL initially. Some said that AL was an obvious choice as a known, well-established reputable provider with well-qualified tutors. Others valued the accessibility of exercise classes being run in their local village hall which meant that they could walk there. Furthermore the familiarity of such surroundings was privileged over the perceived alien environment of a gym or leisure centre where it could be embarrassing to display an unfit body.

Conversely the qualities which participants value in AL exercise provision have implications for other existing providers to welcome older clients. Features such as accessibility of venue and classes where the membership is stable so that social bonding is facilitated are attractive to older adults who may no longer drive and who may experience loneliness and the need to form new social networks. As Linda (68) says,

Yes, it's nice to be in a group...to belong to a group (Linda, 68 Fri.ETM FG 31/10)

These sentiments are reflected in Stillman and Baumeister's view

Belongingness is an essential factor in creating meaning in life (Stillman and Baumeister, 2009 p.249).

I draw on learning theory to suggest how the findings of this case study might be applied to policy. When learning is designed to be transformational the emphasis should be on 'how' rather than on 'what' (Baumgartner, 2000) suggesting that guidelines might be more readily acceptable if they focused on incorporating exercise into lifestyle rather than quantifying the practice. Jebb (2015) conveys an understanding of the difference between interpreting policy at government level and at the level of the individual when she says 'Targets are things we need in terms of a set of policies, and we monitor against them and so on, but they are not always the best way of communicating with individuals' (Jebb, 2015 p.21). When applied to the process of justifying the receipt of funding for the administration of AL classes it would seem that enrolment figures and attendance ratios for exercise classes for older adults might be sufficient to fulfil the requirement for quantitative targets. Social policy addressing the reduction of sedentary behaviour set at less than 30 minutes activity per week suggests that exercise engagement targets are already being met for people in classes which last one hour and that improvements for them might be viewed as axiomatic. Hence not only are exercisers in AL classes irritated by the time wasted in their classes by the obligation to set what they perceive to be as meaningless targets but the process itself appears to be futile. By exploring lived experience this study has illuminated how ageing and exercise are conceptualised by older adults. This mismatch in philosophy between exercisers and exercise providers has been recognised more generally by Phoenix and Tulle (2018: 270) when they advocate 'shifting the emphasis within physical activity programmes to a focus on experiential and affectual encounters rather than instrumental gains'.

9. 6. Summary

This chapter has attempted to explore the components of group exercise classes with reference to what makes them effective and enjoyable and how this is achieved. An initial analysis of the data showed that strong opinions were divided along a line representing pleasure and counter-pleasure. Factors associated with counter-pleasure were those which were rejected and did not feature in current exercise classes. They also tended to be the corollary of those valued factors which were sought. Understanding was enhanced by examining participants' negative experiences of exercise, what they found unacceptable and why.

A closer examination of unacceptable factors revealed that it was the deeper meanings that they had for participants rather than their superficial nature. Particularly important were the relationship established with the instructor and the quality of the atmosphere promoted in the class. The instructor's ability to foster a comfortable, non-judgemental atmosphere and to encourage dialogue was especially significant. In conjunction with the aforementioned negative features that have been encountered in other exercise classes designed for older adults the necessity for the instructor to have well developed teaching skills has implications for how exercise providers frame 50+ group exercise; how they recruit instructors and how instructors are trained.

As the majority of my classes are run by AL I discuss how sound relationships in the class are important when managing elements that might otherwise detract from the exercise experience. An investigation of the administrative practices and philosophy underlying these less attractive features suggests that the provision of 50+ exercise and the policies that guide it are not always in tune with the effects it is intended to have on engagement, nor with the meanings that participants ascribe to it. By opening up the 'black box' and uncovering the features of the 'package' that makes a class accessible and meaningful to participants I have made a unique contribution into understanding what counts in providing exercise classes for older adults. Far from assuring quality the reductionist systems used by AL for monitoring tend to undermine rather than promote it. By comparison I highlight the reasons that older adults are attracted to AL exercise provision and the benefits that are integral to the way that it is structured.

Finally I discuss the state of uncertainty which currently surrounds the continued provision of exercise classes under the auspices of AL and the relative merits to be sought in alternative options should AL provision cease. Given the current state of flux surrounding the administrative reorganisation of AL it is to be hoped that whatever happens, and whoever the exercise provider may be, that this concept of aligning those features which create for the participants acceptable, meaningful and enjoyable exercise experiences should be observed and does not founder under the weight of pressure from economic considerations. If, during the process of reorganisation, the exercise classes should be freed from the tortuous and apparently meaningless administrative processes, it might be possible to reduce the enrolment fee and to attract a wider section of the older adult population.

Chapter Ten: Conclusion

10.1. Introduction

The purpose of this thesis was to explore how perceptions of the processes of ageing mesh with engagements with exercise with a view to identifying factors which might be useful in attracting other older adults to exercise.

In this concluding chapter I revisit the research questions in the light of my findings. The first two questions concerning perceptions of the processes of ageing and how these relate to engagement with exercise can be seen to intersect and so will be discussed together.

Findings from these first two questions provide the foundation for a response to the third question. So this last question will be discussed separately. Furthermore, issues which emerge from this third question relate to the contribution that the study makes to knowledge and also form the basis for recommendations for further research which arise from the endeavour. Consequently these discussions will terminate the chapter.

Two interim steps link the initial discussion with the last. The first explores my personal learning journey which parallels the research trajectory and which forms the vehicle for the findings. It shows how the processes of interaction and reflexivity advanced the inquiry. The second defines the parameters which serve to confine the contribution to knowledge but which assist in identifying areas which would benefit from further research.

I begin with a discussion of the first two research questions:

- How are the processes of ageing perceived?
- How do these perceptions relate to engagement with exercise?

10.2. Perceptions of ageing and exercise

The way that the processes of ageing are achieved appears to be a function of the individual. Social actors draw upon personal and historical experience mediated by the body (Smith, 2016). Nevertheless the body itself is only foregrounded when a physical problem occurs (Frank, 1991) and then only in terms of being a problem to be managed. Addressing such problems reflect Shilling's notion (1993) that the body is always unfinished for the findings show that, generally, such problems are not allowed to disrupt the flow of daily life. That said a measure of ambivalence exists in the way that ageing is approached which reflects the many meanings and discourses discussed earlier in Chapter Three. For example

individuals claim never to think about their age but then go on to discuss how it is necessary to pace themselves owing to waning energy levels. Reaching the 80th birthday draws a whole host of reactions ranging from astonishment at being that old to gratitude for still being alive at that age. It also draws respect and admiration as a role model from younger exercisers – people in their 60s and 70s. The notion of being 80 thus forms a metaphor for the way that age is constructed within the group. Being an active member of an exercise group at the age of 80 is perceived as an accomplishment to be respected and emulated. It is not seen as a milestone for change but part of the continuous process of ‘becoming’ (Laz, 2003).

Exercise has a role in this process of becoming, whether it is a way of helping to manage a specific problem or a strand of activity integrated into the life course. The older participants of this study who are already engaged in exercise tend to regard physical activity as an obvious accoutrement to the process of ageing well and are at pains to find the style and all-round experience of physical activity that suits them best personally. Social networks play a significant part in the process. First, existing social links can help in identifying a suitable class that has been recommended by friends who are already current members. Secondly becoming part of a social network or ‘belonging’ (Stillman and Baumeister, 2010) to the group forms strong liaisons and hence an extra reason for adhering to that particular exercise. The experience is reconstructed every week and is never the same. There is always something to affect the way the experience is perceived (Sartre, 1954). For example there may be variations in temperature, number of members present and the way they interact; levels of challenge presented and accepted or just the way individuals are feeling on that occasion.

The three profiles that Dionigi (2010) adopts to categorise older exercisers as ‘continuers’, ‘rekindlers’ or ‘late starters’ hints at the way that exercise can be differentially linked to lifestyle over the life course. For some of my participants exercise has been a constant throughout the life course, though exercise interests and activities may have altered with age. For others the position of exercise ebbs and flows. The ebbs are often represented by the pressures of child rearing or intense work schedules and the flows occur when duties become lighter or are relinquished. The flows are facilitated by increased availability of time, for example when the children start school or when individuals retire from work.

Alternatively specific events such as retirement or widowhood may drive the desire to try out new activities or to create new social networks. The patterns which emerge suggest that engagement in exercise is closely related to the conditions and rhythms of the life course. Individuals choose the culture and frequency of their activities to suit their current circumstances and recalibrate their lives as they feel necessary reflecting changes in status and social identity. Hence engagement with exercise too can be perceived as being always in a state of 'becoming' (Laz, 2003). The ability to attract people towards exercise engagement implies an acute awareness of such varying circumstances. The participants of the study seek exercise which fits into their lifestyles and has the ability to cater for and empathise with their needs.

The study showed that there were specific factors that participants found essential in their choice of exercise class and others that they disliked. Participants across the three exercise cultures were divided by their desire (or not) to 'get hot and sweaty'. Pilates' participants often said that ETM did not appeal to them because they wanted to avoid getting hot and sweaty. Conversely participants in tai chi and ETM often said that Pilates did not appeal to them because they did not want to spend most of the time lying on the floor. Members of tai chi groups had the choice of standing or sitting, but usually chose to spend the majority of the time standing. They sought calm, slow, gentle movement; the feelings of calm and relief of stress that this brought them and the benefits for arthritic conditions of strengthening the muscles around the joints; improved range of movement; better posture, balance and stability. They did not seek the speed of movement and coordination implied in ETM classes.

Members of ETM groups appreciated the variety of activity in their class: the changes in pace and variety of routines; the toning exercises; working against resistance and finally the relaxation and stretching. They enjoyed rhythmic movement to music (even those who had difficulty keeping to the beat of the music) and the opportunity to accept challenges when they felt like it. However 'getting hot and sweaty' did not feature on their agenda in the way that participants of other exercise cultures believed that this condition would be central to ETM classes. For members of ETM classes what mattered most was the choice of music. In addition to the music having a strong beat suited to the accompanying exercise participants like to be able to recognise the songs though they are quite happy to be introduced to new

songs provided that they are sufficiently melodic. I know when I have chosen well because people ask me for details of the tracks I have used. Also important to them is the way that they are addressed in the lesson. First and foremost, they did not want to be 'shouted at' by an instructor using a head microphone. At such a volume they can appreciate neither the music nor hear the instructions clearly. Besides, such a technique represented for them the epitome of authoritarian leadership. In addition choice of exercise clothing, and particularly the instructor's choice of clothing, was significant. They said that they did not want to be made to feel inadequate by the appearance of a young, dynamic instructor clad in lycra. On the contrary flexibility in approach and in expectations was much appreciated.

This last factor, perceived as a quality pertaining to an empathetic instructor, was appreciated by participants across all three exercise cultures. People like to feel that they are in control of their exercise rather than being 'regimented'. They are able to gain such feelings by being presented with optional activities or by challenges spanning a range of difficulty. They gain satisfaction from achieving a higher range of challenge that they have chosen to accept rather than feeling diminished and dispirited by perceived failure. On occasion there are requests that favourite sequences are incorporated in the lesson. In this way sessions become co-constructed. A lesson plan already exists, as required by my employer, but it is flexible and can easily be adapted to accommodate requests.

Feelings of satisfaction or pleasure were considered an essential quality of all three exercise cultures. One participant's husband replied to an AL telephone survey 'Well, she wouldn't go if she didn't enjoy it, would she?' Also common to all exercise groups were expressions of the notion of the 'package' of factors considered essential for an enjoyable session and that of 'partnership'. All three 'P's' - pleasure, package and partnership - contribute to the character of the class which was identified as the overall most important theme of the entire study. So far I have discussed the importance of the package and how its contents are multifactorial but vary for individuals and for physical culture. Striking the right balance is instrumental in producing the pleasure. However pleasure is also produced as a result of partnership which is implied in the way that the class is managed, the comfortable, non-threatening atmosphere produced and the interactive relationship which obtains. In Chapter Nine I discussed the significance of the teaching and learning strategies involved in this process. I also identified factors which can detract from the ability to establish such a

partnership, for example inappropriate monitoring and evaluation procedures or insufficient attention to the suitability of training or recruitment of the instructor.

In summary three elements are essential to a safe and effective 50+ exercise session. They emerge as the mixture of requirements that participants seek in tandem with an absence of factors which they view as deterrents to exercise. 'Package' has emerged from the corpus of the data to describe this mixture. Hence the package is multifactorial but it is not homogeneous nor is it a static blend. Different features appeal to different individuals and at different times along the life course. Despite this variety it is possible to discern two other salient factors. The first is that the exercise experience within the package is relational. It is created in 'partnership' with the instructor and with other participants in the group. The second is that a requisite by-product of exercise, essential for adherence, should be 'pleasure'. The majority of the participants view pleasure or satisfaction as an important component of exercise. Very few report that their involvement in exercise is driven purely by duty or inspired by feelings of responsibility to maintain health and fitness as they age, though the latter often comprises an underlying motivational factor.

The significance of these three 'P's will be discussed further in relation to the third research question in the latter part of this chapter. In the meantime I turn my attention to the personal learning journey which accompanied the research. I trace the trajectory from reductionist beginnings and the statistics which underpin the policies of exercise provision. I show how the processes of research have added to understanding of our aims of exercise; how they may differ from those of our exercise provider; how notions of partnership evolve and are instrumental in achieving pleasurable outcomes in the exercise class.

10.3. What I learnt

'Lies, damn lies and statistics' (Mark Twain, 1906, North American Review).

I have always had a healthy regard for statistics especially in the way that they can be used to support an argument but had not had occasion to consider how the method of their production might colour interpretation. Consequently I accepted at face value the mismatch between the statistical findings of ADNFS (1992; 1999) and the feelings of people who thought they were fit compared to the length of time and frequency with which they were physically active. These figures pre-dated Timmons' (2013) work that demonstrated genetic

differences in the way that people responded, or not, to cardio vascular (CV) activity, thereby suggesting that the CMO recommended values for weekly physical activity may not be effective for everyone. This particular finding served to increase my scepticism towards 'Big Data' (Bengtson and Settersten, 2016) which strip the detail from lived experience. Two of my participants, Rhona (71), and Brigitte (78), a retired yoga teacher, had independently remarked on their perceptions of their friends' fitness, health and lifestyle in relation to exercise and that different approaches appeared to suit different people. At the time I did not pay much attention to these comments but in the light of my findings I respect the contribution of such perceptions to the heterogeneity of approaches to exercise and the polysemous nature of health, supported by the views of experienced researchers who maintain that 'one size does not fit all' (Phoenix and Grant, 2009; Segar and Richardson, 2014).

Following the WHO (2015) definition of healthy ageing I recognise that the link between exercise and health is more than a measure of CV fitness but that this model was used as the basis for the original CMO exercise recommendations because heart disease is linked statistically to the greatest quantity of deaths in UK. Taking an overview of my participants' PAR-Q pro forma very few indicate CV problems other than hypertension which is already controlled by medication. We have no formal way of identifying how the exercise we do may have affected these initial indications. I have not collected statistical evidence of involvement in physical activity beyond the one or two weekly hour sessions they spend in my exercise classes but I am aware from conducting my questionnaire at the beginning of the study that many participants engage in other exercise activities so they may meet the 150 minutes per week guidelines. The holistic picture I have created is not bound by the CMO guidelines but attempts to portray how exercise fits into people's lives with particular reference to their perceptions of ageing. Judging by their actions in recommending the sessions that I lead to friends and the friends' subsequent enrolment I infer that they find the sessions worthwhile. I find it slightly embarrassing to report some of the flattering comments that people make about my role in their exercise experience but these comprise part of the evidence which supports the validity of these sessions and their capacity to enhance quality of life. I did not accept these views at face value but found ways of interrogating them. Probably the best evidence of their trustworthiness is demonstrated by

the influx of new members who join the class following the recommendation of their friends who are already members of the exercise group.

I note with gratification that the course of my research journey is paralleled by the development of a more sensitive interpretation of CMO guidelines for exercise. When asked to identify the most important message for improvement by the government select committee on health Knapton replied 'Just do more' (2015, p.48). The notions of encouraging people to increase the amount of exercise they do and to build it into their lifestyle have also been captured in the most recent issue of the guidelines 'Everybody Active, Every Day' (2014).

My findings lead me to believe that exercise is rooted in the formative background, culture and preferences of exercise participants and my study aims to make visible the structures and strategies which converge to make exercise attractive, enjoyable and engaging. In this respect I have always recognised that, for me, exercise is more enjoyable in the company of other people who are not interested in competition. Learning how other people respond has caused me to reflect upon my own views and experience. Lack of sporting background, interest or ability in sport all contribute to a potentially sedentary lifestyle but awareness of the need to be physically active – even if it was only to avoid being shouted at by the teacher in school – led me to find alternative routes for activity. I have found that my participants often report similar experiences.

I have enduring memories of being a small child with saliva running down my chin and the frustration of trying to gain control of a football from my older brother who all the time was shouting 'Dribble! Dribble!' So I eschewed this unfair competition whose arcane rules militated against me in favour of finding independent modes of physical expression. I believe that my understanding of, and empathy for, my exercise participants draws on these early experiences. Though I attach great importance to exercise I have learnt intuitively not to take the process too seriously. I have also learnt that there are additional benefits to be had from the exercise experience which may be what inspired me to embark upon a second career as an exercise instructor. I have always confessed to the selfish nature of the decision in that I wanted to stay fit and healthy well into retirement myself.

My participants have taught me that I am not alone in some of these feelings. Their stories, told for the benefit of the research, have opened up issues for discussion which would normally be beyond the scope of an ordinary exercise class and the thesis has acted as a vehicle to articulate these thoughts which otherwise may never have been voiced. I cite for example issues related to the beneficial effects of exercise for memory (Fotuhi, 2015).

I offer these recollections in the spirit of their being able to enhance understanding of others' exercise experience and to contribute to sensitive developments in encouraging older adults to engage in exercise. The discussion forms the basis for revisiting the third research question, 'What are the implications for social policy and the provision of exercise?' which will be discussed for its ability to make a contribution to knowledge and its ability to provoke recommendations for further research related to these issues.

10. 4. Contribution to knowledge

The findings build on the recognition that pleasure constitutes an important component of exercise (Booth, 2009; Wellard, 2014) and its significance in the promotion of wellbeing. They also take account of work aimed at identifying the origins and nature of pleasure in exercise (Phoenix and Orr, 2015). Individuals who come together to share exercise often experience a synergy, a bonus, or something extra that they would not have otherwise experienced. In striving to make visible how that happens this study makes an original contribution to knowledge. The findings highlight the key importance that pleasure in exercise holds for older adults and its ability to secure their allegiance to classes. They imply that health promotion policies which take a transformational rather than a transactional approach to exercise provision might be more effective in engaging older adults in exercise.

In Chapter Nine I explored the range of sources from which pleasure in exercise appears to arise. For example there are simple sources such as the accessibility of being able to walk to an effective exercise class or the comfortable experience of routine behaviour. Enjoyment may be embodied in performing a series of movements in a controlled manner or may be socially constructed out of effects such as a sense of belonging to a class or meeting a group of people to share an activity on a regular basis. I showed that few of these pleasures exist in isolation but are experienced differentially and often jointly, linking sentient experience to environment, social context and agency via partnership with other people. I identified

how the experience of pleasure is different for different individuals in different cultures of exercise; may be affected by different beliefs or cultural values; how it can change over time and how it is reconstituted on every occasion.

In identifying the centrality of pleasure to the provision of an effective exercise class and the concurrent promotion of wellbeing I drew attention to monitoring practices that attempt to measure the effect of exercise by comparing inputs and outputs in the manner of a transaction. Such an approach tends to overlook the significance of pleasure or even disrupts its production. Not only does my research identify pleasure as a concatenation of miscellaneous effects experienced subjectively but it frames pleasure as a process which develops freely in negotiation with others on every occasion that groups meet. How this occurs is facilitated by the adoption of appropriate teaching and learning strategies that are pertinent to the members of the group, the nature of the exercise and transient conditions relating to time and place.

What is produced is a unique and authentic experience on every occasion that can be affected by conditions in the room, changes in temperature, members who are absent and their reasons for absence. The underlying impetus is to co-construct a situation in which participants may respond competently and with confidence. What counts is the quality of process that shapes the outcome which the data suggest is embodied pleasure.

The process to which I am referring is synonymous with the contents of the 'package'. By opening the 'black box' of the exercise class I have revealed the process in action and have been able to identify the features which make up the contents of the 'package'. The findings provide a unique contribution to understanding the salient features necessary for providing effective group exercise for older adults. In addition I have remained faithful to the judgement criteria relating to feelings, values and beliefs that were established in Chapter 5.14., P. 110.

The critical journey has been facilitated by looking at group exercise provision through the lens of AL administrative practices which have often been shown to compromise the aims of older exercise participants. However the AL model also has much to recommend it in terms of promoting social networks, adherence to exercise and the recruitment of appropriate tutors. Finding ways of reframing these virtues in the commercial sector might prove

effective in engaging other older adults in exercise. Equally the drawbacks to AL provision in the form of a reductionist approach to monitoring progress and a transactional approach to quality assurance provide warnings to other exercise providers. Such approaches hold little meaning for the older adults in this study, disrupt the flow of the exercise and should be avoided. A more negotiated approach is indicated.

10.5 Limitations of the research

The case study focuses on 50+ ETM, tai chi and Pilates groups that I instruct in a 20 mile radius of my home. All the groups are run under the auspices of AL with the exception of the community group. There are other such groups in the area, some of which are also run by AL but the study does not cover these. I have spoken with some of their instructors and understand that there are differences in the way that many of these groups are run. Thus I signal that my findings are confined exclusively to the groups that I work with and do not apply to similar groups in the area, except that the administrative arrangements for AL are standardised and obligatory.

The obligation to pay for ten AL sessions in advance also implies that membership of these groups is contingent upon individuals' ability to make such financial commitment. The area lies within the London commuter belt and the majority of the participants have been or still are involved in professional employment.

Most of the participants are female. In two former ETM groups there has been a single male participant; similarly in three Pilates groups. There are a few AL exercise groups that are aimed exclusively at men. These tend to be based on circuit training activities or competitive sports. Perhaps because of its connection to combat as a martial art tai chi tends to attract marginally more men than the other two exercise cultures. The other tai chi instructor who runs classes in the same area as I do tells me that this is the case. However the specific version of tai chi that I teach has a strong health bias and so may not be comparable to other studies of tai chi groups.

An overview of the readiness for physical activity questionnaire (PAR-Q) that individuals complete at the moment of enrolment indicates that, in terms of medical health, extremely few participants suffer from diabetes, dizzy spells or have been diagnosed as having a heart condition. There are a few (less than a third) that experience hypertension but this is

medically controlled. Consequently any physiological effects in this inquiry may not be comparable with those found in studies where the participants have been referred for exercise in order to support, improve or rehabilitate from specific conditions. Conversely joint or back problems are mentioned more frequently on the PAR-Q and often feature in the reasons for joining the class.

I draw on Dewey's (1938) work on reflective problem-solving to observe a measure of hesitancy in offering my findings as a panacea to encouraging increased uptake of older adult exercise classes. Dewey argues that inquiry and research tells us about relationships between what happened under the conditions described and therefore shows what was possible without expressing any certainty of what will be possible in other conditions. Nevertheless as Biesta says (2010) this account provides a model of professional action and a view about the role of knowledge in action.

10.6. Recommendations for further research

The conclusions drawn from the study are bounded by the culture in which the exercise groups are situated – predominantly middle class residents of the London commuter belt. Validity for other cultures might be tested by pursuing similar ethnographic research for 50+ exercise groups coming from different cultural backgrounds.

The findings point to pleasure being an important factor in exercise. It appears that the deployment of appropriate teaching and learning strategies play a significant part in shaping pleasurable or satisfying outcomes of exercise. This has implications for instructor training and awareness. It also has policy implications for exercise providers who need to recruit suitably trained instructors for 50+ groups. Research into the way that instructors are trained; how qualifications are represented and how providers use the information might be illuminating. The effects of demographic change on a burgeoning population of older adults who might be beneficially attracted to exercise suggests that perhaps the focus should be directed towards the recruitment and training of more mature instructors who might more easily empathise with the life experience of older exercisers.

Lastly there could be economic benefits from research which reconceptualised the place of 50+ exercise in Adult Learning schemes. Money saved by making more relevant and meaningful the procedures designed to monitor progress and to assure quality could be

diverted into the sort of training suggested above where the emphasis is placed on shared learning of what it means to inhabit an older body.

84880

List of References

- Age Concern England (1992) *Dependence: The Ultimate Fear*. London: Age Concern England.
- Ades, P. A., Michael, M. J. and Toth, M. J. (2005) Accelerated decline of aerobic fitness with healthy aging. What is the good news? *Aha journals*. Retrieved 5/12/2013 from <http://circ.ahajournals.org/content/112/5/624.full>
- Aldwin, C. M. & Igarashi, H. (2016) Coping, Optimal Aging and Resilience in a Sociocultural Context. In Bengtson, V. & Settersten, R. A. (eds.) (2016) *Handbook of Theories of Aging*. New York: Springer Publishing Company.
- Allen Collinson, J. (2009) Sporting embodiment: sports studies and the (continuing) promise of phenomenology. *Qualitative Research in Sport and Exercise* **1** 3 279 -296
- Allender, S., Cowburn, G and Foster, C. (2006) Understanding participation in sport and physical activity among children and adults: a review of qualitative studies *Health Education Research: Theory and Practice* **21** (6) 826-835
- Allied Dunbar National Fitness Survey (1992)
- Amardottir, E. S., Mackiewicz, M., Gislason, T., Teff, K. L. and Pack, A. I. (2009) Molecular signatures of obstructive sleep apnoea in adults: a review and perspective *Sleep* **32** (4) 447 470
- Andrews, M. (1999) The seductiveness of agelessness. *Ageing & Society*, **19** (3), 301 -318
- Associated Retirement Community Operators (2015) *Setting Standards for Retirement Communities* Retrieved 12 March 2016 from <http://arcouk.org>
- Atchley, R. C. (1993) Continuity theory and the evolution of activity in later adulthood. In J. R. Kelly (ed.) *Activity and Ageing*. London: Sage. Cited in Jamieson, A. & Victor, C. (eds.) (2002) *Researching Ageing and Later Life*. Buckingham: Open University Press.
- Athens, L., Clough, P. T. & Lemert, C. (1994) The Self as a Soliloquy *Sociological Quarterly* **3** 521 -531
- Atkinson, S., Lawson, V. and Wiles, J. (2011) Care is needed in moves to measure wellbeing. *Social and Cultural Geography* **12** (6) 563 -572
- Atkinson, S., Fuller, S. and Painer, J. (2012) *Wellbeing and Place* Farnham, Surrey: Ashgate
- Atkinson, S. (2013) Beyond Components of Wellbeing: The effects of relational and situated assemblage. *Topoi* **32** 137 -144

- Augestad, L.B., Schei, B., Forsmo, S., Langhammer, A. & Flanders, W.D. (2006). Healthy postmenopausal women – Physical activity and forearm bone mineral density, the Nord-Trøndelag health survey. *Journal of Women and Aging*, **18** (1) 21 -40.
- Avis, M. (2005) Is there an epistemology for qualitative research? In *Qualitative Research in Health Care* Holloway, I. (ed.) Maidenhead: Open University Press.
- Baars, J. (2012) *Ageing and the Art of Living*. John Hopkins University Press: Baltimore. In Phillipson, C. (2013) *Ageing*. Cambridge: Polity
- Baars, J., Dohmen, J., Grenier, A. and Phillipson, C. (eds.)(2014) *Ageing, Meaning and Social Structure. Connecting critical and humanistic gerontology*. Bristol: Policy Press
- Ballard, K., Elston, M.A. & Gabe, J. (2005) Beyond the mask: women's experiences of public and private ageing during midlife and their use of age-resisting activities. *Health: An Interdisciplinary Journal for the Social Study of Health, Illness and Medicine*. **9** (2) 169 -187
- Baltes, P. B. and Baltes, M. M. (1993) *Successful Ageing: Perspectives from the Behavioural Sciences*. Cambridge: Cambridge University Press
- Baltes, P. & Smith, J. (2003) New Frontiers in the future of ageing: from successful aging of young old to the dilemmas of the fourth age. *Gerontology*, **49** 123 -35.
- Barak, B. & Schiffman, I. (1981) Cognitive Age: a nonchronological age variable. In Monroe, K. (ed.) *Advances in Consumer Research*. Volume 8, Association for Consumer Research pp.602 – 6. Michigan: Ann Arber
- Barnes , S. F. (2011) *Fourth Age – The Final Years of Adulthood* available from www.calbooming.sdsu.edu/documents/TheFourthAge Accessed 4th Jan.2018
- Barron, E. (2016) Live long or live well? *The Psychologist*. **29** 3, 210 - 211
- Barone, T. and Eisner, E. (2012) *Arts based research*. London: Sage
- Bass, S. (2006) Gerontological Theory: The Search for the Holy Grail. *The Gerontologist*. **46** 1, 139 – 144
- Battle, J. (2016) Presentation on organised walks in the City of Leeds at *Men, ageing and physical activity: Critical Reflections*. 3.6.2015 conference at Leeds Beckett University.
- Bauman, A. F., Loos, R. JF., Martin, B. W., Reis, R. S., Sallis, J. F. and Wells, J. C. (2012) The correlates of physical activity: why are some people physically active and others not? *The Lancet* 380 9838 258 - 271
- Bauman, Z. (1998) *Globalization: The Human Consequences*. Cambridge: Polity. In Phillipson, C. (2013) *Ageing*. Cambridge: Polity

- Bauman, Z. (2005) *Liquid Life*. Cambridge: Polity
- Bauman, Z. & Raud, R. (2015) *Practices of Selfhood*. Cambridge: Polity Press
- Baumeister, R. F. (1987) How the self became a problem: A psychological review of historical research. *Journal of Personality and Social Psychology*. **52** (1), 163 -176
- Baumeister, R. F. (1991) Meanings of Life. New York: The Guilford Press. In Stevens, R. (ed.) (1996) *Understanding the self*. London: Sage
- Baumeister, R. F. and Leary, M. R. (1995) The Need to Belong: Desire for Interpersonal Attachments as a Fundamental Human Motivation *Psychological Bulletin* **117** (3) 497-529
- Baumgartner, L. M. (2001) An Update on Transformational Learning. *New Directions for Adult and Continuing Education*. 89 15 -24
- BBC News UK (2011) England and Wales Population up. Available from www.bbc.org.uk/news [Accessed 16 July, 2012.]
- Beaumont, J. (2011) *Measuring National Well-being: A discussion paper on domains and measures*. London: Office for National Statistics
- Beck, U. (1991) *Risk Society*. London: Sage Publications.
- Beck, U. and Beck-Gernsheim, E.(2002) *Individualization*. London: Sage Publications
- Bengtson, V. and Schaie, K. W. (eds,) (1999) *Handbook of Theories of Aging*. New York: Springer Publishing Company.
- Bengtson, V. & Settersten, R. A. Theories of Aging: Developments Within and Across Disciplinary Boundaries. In Bengtson, V. & Settersten, R. A. (eds.) (2016) *Handbook of Theories of Aging*. New York: Springer Publishing Company.
- Bennett, E. V., Crocker, P. R. E., Kowalski, K. C. and Hurd- Clarke, L. (2015) Older physically active women's perceptions and experiences of body self-compassion. *Journal of Exercise, Movement and Sport*. **47** (1) 151
- Bennett, E. V., Hurd Clarke, L., Kowalski, K.C. and Crocker, P. R. E. (2017) 'I'll do anything to maintain my health': How women aged 65 – 94 perceive, experience, and cope with their aging bodies. *Body Image* **21** 71 – 80
- Bennett, E. V., Hurd Clarke, L., Kowalski, K.C. and Crocker, P. R. E. (2017) From pleasure and pride to the fear of decline: Exploring the emotions in older women's physical activity narratives. *Psychology of Sport and Exercise* **33** 113 - 122
- Berger, P.L. and Luckmann, T. (1967) *The Social Construction of Reality*. London: Allen Lane

- Berger, U., Der, G., Mutrie, N & Hannah, M.K. (2005) The impact of retirement on physical activity. *Ageing & Society* **25**, 181 -195
- Bidonde, J. M., Goodwin, D. L. & Drinkwater, D. T. (2009) Older Women's Experiences of a Fitness Program: The Importance of Social Networks. *Journal of Applied Sport Psychology*. 21:S1, S86 – S101
- Biesta. G. J. J. (2010) *Good Education in an Age of Measurement: Ethics, Politics, Democracy*. London: Routledge
- Biggs, S. (1993) *Understanding Ageing* Buckingham: Open University Press
- Biggs, S. (1997) Choosing not to be old? *Ageing and Society* **17** 553- ?
- Biggs, S., Lowenstein, A. & Hendricks, J. (2003) *The Need for Theory: Critical Approaches to Social Gerontology*. Amityville, NY: Baywood Publishing Company Inc.
- Biggs, S. (2004) Age, gender. Narratives and masquerades. *Journal of Aging Studies*. **18** 45 - 58
- Binstock, R. and George, L. (eds.) *Handbook of Aging and the Social Sciences*, 7th edition, San Diego, CA: Academic Press
- Birren, J. E. & Bengtson, V. (eds.) (1988) *Emergent Theories of Aging*. New York: Springer Publishing Company.
- Black, P., & Wiliam, D. (1998) Inside the black box: Raising Standards through classroom assessment. *Phi Delta Kappa*, Oct. 1998. Retrieved from www.dpi.state.nc.us/docs/accountability/.../insidetheblackbox1998.pdf March, 2015.
- Black and Wiliam (2001) Inside the black box: Raising Standards through classroom assessment. <http://weaeducation.typepad.co.uk/files/blackbox-1.pdf> {Accessed March, 2015]
- Blaikie, A. (1999) *Ageing and Popular Culture*. Cambridge: Cambridge University Press
- Blair, S. N., Kohl, H. W., Paffenberger Jr., R. S., Clark, D. G., Cooper, K. H. and Biggins, L. W. (1989) Physical Activity and all-cause mortality. A prospective study of healthy men and women *Journal of the American Medical Association* **262** 2395 - 2401
- Blair, I. S. & Wei, M. (2000) Sedentary Habits, health and function in older men and women *American Journal of Health Promotion* **15** (2) 84 -93
- Bloodworth, A., McNamee, M. and Bailey, R. (2011) Sport, physical activity and well-being: an objectivist account. *Sport, Education and Society* **17** 4 479 – 514

- Bollas, C. (1987) *The Shadow of the Object: Psychoanalysis of the Unthought Known*. London: Free Association Books. Cited in Craib, I. (1998) *Experiencing Identity* London: Sage
- Booth, D. (2009) Politics and pleasure: the philosophy of physical education revisited. *Quest* 62 133 – 153
- Bordo, S. (2003) *Unbearable weight: Feminism, western culture and the body*. Los Angeles, CA: University of California Press. Cited in Hurd Clarke, L. and Korotchenko, A. (2011) Ageing and the Body: A Review. *Canadian Journal of Aging* 30 (3) 495 -510
- Bornat, J. and Jones, R. L. (eds.)(2014) *Imagining Futures: Methodological Issues for Research into Ageing*. London: Centre for Policy on Ageing.
- Bowling, A. Farquhar, M. and Browne, P. (1991) Life satisfaction and associations with social network and support variables in three samples of elderly people. *International Journal of Geriatric Psychology* 6 549 – 566. Cited in Wiggins, R. D., Higgs, P. F. D., Hyde, M. & Blane, D. B. (2004) Quality of life in the third age: key predictors of the CASP-19 measure. *Ageing & Society* 24 693 -708
- Bowling, A. Farquhar, M., Grundy, E. & Formby, J. (1999) Changes in life satisfaction over a two and a half year period among very elderly people living in London. *Social Science and Medicine*, 36 641 -55
- Bowling, A., See-Tai, S., Ebrahim, S., Gabriel, z. & Solanki, P. (2005) Attributes of age-identity. *Ageing & Society*, 25 479 -500
- Bröckling, U. (2016) *The Entrepreneurial Self. Fabricating a new type of subject*. London: Sage
- Brubaker, P. H., Moore, J. B., Stewart, K. P., Wesley, D. J. and Kirkman, D. W. (2009) Endurance exercise training in older patients with heart failure: results from a randomized controlled single-blind trial *Journal of the American Geriatric Society* 57 (11) 1982 - 9
- Bryman, A. (2001) *Social Research Methods*. Oxford: Oxford University Press
- Bucher, C. (1974) National adult fitness Survey: some implications. *Journal of Health, Physical Education and Recreation* 45 25 -28. In J. Curtis, W. McTeer, and P. White, (1999) Exploring Effects of School Sport Experiences on Sport Participation in Later Life. *Sociology of Sport Journal* 36 348 -365
- Bultena, G. L. and Powers, E. A. (1978) Denial of Ageing: Age identification and reference group orientation. *Journal of Gerontology*. 33 748 -754
- Buote, V. M., Wilson, A. E., Strahan, E. J., Gazzola, S. B. and Papps, F. (2011) Setting the bar. Divergent sociocultural norms for women's and men's ideal appearance in real-world contexts. *Body Image* 8 (4) 322 – 334

- Burkitt, I. (1991) *Social Selves. Theories of the Social Formation of Personality*. London: Sage
- Burkitt, I. (2008) *Social Selves. Theories of Self and Society. Second edition*. London: Sage
- Burkitt, I. (2012) Emotional reflexivity: Feeling, emotion and imagination in reflexive dialogues *Sociology* **46** (3) 458 - 72
- Burr, V. (2003) *Social Constructionism*. 2nd ed. London: Routledge.
- Bussell, D. (1998) *Life in Dance* London: Century
- Bytheway, B. (1995) *Ageism*. Buckingham: Open University Press
- Bytheway, B. (2000) Youthfulness and agelessness: a comment. *Ageing & Society* **20** 781 - 789
- Bytheway, B. (2005) Age-identities and the celebration of birthdays. *Ageing & Society* **25** 4, 463 – 477.
- Bytheway, B. (2011) *Unmasking Age. The Significance of Age for Social Research*. Bristol: The Policy Press
- Cabrita, M., Lousberg, R., Tabak, M., Hermans, H. J. and Vollenbroek-Hutton (2017) An exploratory study on the impact of daily activities on the pleasure and physical activity of older adults. *European Review of Aging and Physical Activity* **14** 1 - 14
- Caillois, R. (1961 / 2001) *Man, play and games*. Urbana: University of Illinois Press. Cited in D. Booth (2009) Politics and pleasure: the philosophy of physical education revisited. *Quest* **62** 133 – 153
- Calasanti, T. and King, N. (2005) Firming the floppy penis: Age, class and gender relations in the lives of old men. *Men and Masculinities* **8** (1) 3 – 23. Cited in Hurd Clarke, L. and Korotchenko, A. (2011) Ageing and the Body: A Review. *Canadian Journal of Aging* **30** (3) 495 -510
- Calasanti, T., Sorensen, A. and King, N. (2012) Anti-ageing advertisements and Perceptions of ageing. In V. Ylännä (ed.) *Representing Ageing: Images and Identities*. New York: Palgrave Macmillan.
- Callahan, L. F., Cleveland, R. J., Altpeter, M. and Hackney, B. (2016) Evaluation of Tai Chi Program Effectiveness for People with Arthritis in the Community: A Randomized Controlled Trial. *Journal of Aging and Physical Activity* **24** 101 - 110
- Cardinal, B. J. and Cardinal M. K. (2003) How are physical educators' attitudes toward role modelling physical activity and fitness promoting behaviours formed? *Journal of Human Movement Studies* **44** 187 - 194

Cardinal, B. J., Yan, Z. and Cardinal M. K. (2013) Negative experiences in physical education and sport: How much do they affect participation later in life? *Journal of Physical Education, Recreation and Dance* **84** (3) 49 – 53

Carless, D. and Sparkes, A. (2008) The physical activity experiences of men with serious mental illness. Three short stories. *Psychology of Sport and Exercise* **9** 191 - 210

Carroll, R., Ali, N., Azam, N. (2002) Promoting physical activity in South Asian Muslim women through 'exercise on prescription'. *Health Technology Assessment* **6** 8. Available from <http://www.hta.ac.uk/execsumm/summ608.htm> [Accessed 3 October, 2013.]

Cattan, M. White, J. and Learmouth, A. (2005) Preventing social isolation and loneliness among older people: a systematic review of health promotion interventions *Ageing & Society* **25** (1) 41 - 67

Cerin, E. and Leslie, E. (2008) How socio-economic status contributes to participation in leisure time physical activity. *Social Science Medicine* **66** (12) 2596 – 2609

Chappell and Welsh (2016) Supporting resilience through active ageing. In B. Humberstone and M. Konstantaki (eds.) *Ageing, Physical Activity, Recreation and Wellbeing* Newcastle-upon-Tyne: Cambridge Scholars Publishing

Charmaz, K. (1995) Grounded Theory. In: Smith, J.A.' Harré, R. & Langenhove, L.V. (eds.) *Rethinking Methods in Psychology* London: Sage

Chaudhury, M. & Shelton, N. (2010) Physical Activity among 60-69 year olds in England: knowledge, perception, behaviour and risk factors. *Ageing & Society* **30** 1343 -1355

Choi, J.H., Moon, J-S. & Song, R. (2005) Effects of Sun style tai chi exercise on physical fitness and fall prevention in fall-prone older adults. *Journal of Advanced Nursing* **51** (2) 150-157

Chrisler, j. C. and Palatino, B. (2016) Stronger than you think: Older women and physical activity. *Women and Therapy* **39** (1-2) 157 -170

Chudacoff, H. (1989) *How Old Are You? Age Consciousness in American Culture*. Princeton: Princeton University Press. In Phillipson, C. (2013) *Ageing*. Cambridge: Polity

Clark, M. C. (1998 3) Transformational Learning. In S. B. Merriam (ed.) *An Update on Learning Theory. New Directions for Adult and Continuing Education* no. 57 San Francisco: Jossey-Bass

Clarke, A. and Warren, L. (2007) Hopes, fears and expectations about the future: what do older people's stories tell us about ageing? *Ageing & Society* **37** 465 – 488

Classen, C., Howes, D. and Synott, A. (1994) *Aroma: The Cultural History of Smell*. London: Routledge.

- Coffey, A. (1999) *The Ethnographic Self*. London: Sage
- Cohen, L., Manion, L. & Morrison, K. (2007) *Research Methods in Education* London: Routledge
- Cohen-Mansfield, J., Shmotkin, D. & Goldberg, S. (2010) Predictors of longitudinal changes in older adults' physical activity. *Journal of Aging & Physical Activity* 141 -157
- Cooley, C.H. (1902, 1964) *Human Nature and the Social Order*. New York: Schocken. Cited in Jenkins, R. (2014) *Social Identity* 4th ed. Abingdon: Routledge
- Cooper, Y. (2000) *Speech at Royal College of Physicians*. London
- Coupland, J. (2009) Discourse, identity and change in mid-to-late life: interdisciplinary perspectives on language and ageing *Ageing and Society* **29** 849-861
- Craib, I. (1998) *Experiencing Identity*. London: Sage
- Cranton, P. (1994) *Understanding and Promoting Transformative Learning: A Guide for Educators of Adults* San Francisco: Jossey-Bass
- Crawford, M. (1971) Retirement and Disengagement. *Human Relations* **24**, 217 -236. In Phillipson, C. (2013) *Ageing*. Cambridge: Polity
- Cremmin, M. (1992) Feeling old versus being old: views of troubled aged. *Social Sciences and Medicine* **34** 1305 – 15
- Crossley, N. (2001) *The Social Body: habit, identity and desire* London: Sage
- Crotty, M. (1998) *The Foundations of Social Research: Meaning and perspective in the research process*. London: Sage
- Cumming, E. and Henry, W. E. (1961) *Growing Old: The Process of Disengagement*. New York: Basic Books. In Phillipson, C. (2013) *Ageing*. Cambridge: Polity
- Curtis, J., McTeer, W. and White, P. (1999) Exploring Effects of School Sport Experiences on Sport Participation in Later Life *Sociology of Sport Journal* **36** 348-365
- Cutler-Riddick, C. (2010) Gerontology –Leisure Research: The Past and the Future. In B.Humberstone, (Ed.) *Third Age Leisure Research: Principles and Practice*. LSA Publication No.108. Eastbourne: Leisure Studies Association.
- Cutler-Riddick, C. & Humberstone, B. (2010) Practising yoga later in life: a mixed-methods study of English women. In B.Humberstone, (Ed.) *Third Age Leisure Research: Principles and Practice*. LSA Publication No.108. Eastbourne: Leisure Studies Association.
- Czikszenyimihalyi, M. (1975) *Beyond boredom and anxiety*. San Francisco: Jossey-Bass

Dannefer, D. (2011) Age, the Life Course and the Sociological Imagination: Prospects for Theory. In Binstock, R. and George, L. (eds.) *Handbook of Aging and the Social Sciences*, 7th edition, Academic Press: San Diego, CA, pp.3 - 16

Dannefer, D. (2012) Enriching the Tapestry: Expanding the Scope of Life Course Concepts *The Journals of Gerontology. Series B: Psychological Sciences and Social Sciences* 10.1093/geronb/gbr148

Dant, T., & Wheaton, B. (2007). An extreme form of material or embodied interaction. *Anthropology Today*, **23** (6), 8–12.

Das and Horton (2012) Rethinking our approach to physical activity. *The Lancet* 380 (9838): 189-190.

Davis, N. and Meyer, B. (2009) Qualitative data analysis: A procedural comparison. *Journal of Applied Sport Psychology* **21** 116 – 124

Dawson, J., Hillsdon, M., Boller, I. and Foster, C. (2006) Perceived barriers to walking in the neighbourhood environment and change in activity levels over 12 months. *British Journal of Sports Medicine* **41** 562 - 568

Dean, R. N., Farrell, J. M., Kelley, M. L., Taylor, M. J. and Rhodes, R. E. (2007) Testing the efficiency of the theory of planned behaviour to explain strength training in older adults *Journal of Aging and Physical Activity* **15** (1) 1 - 12

Delamont, S. (1992) *Fieldwork in Educational Settings: methods, pitfalls and perspectives*. London: Falmer.

Denscombe, M. (1998) *The Good Research Guide for small-scale research projects* Buckingham: Open University Press

Denzin, N.K. & Lincoln, Y. S. (2003) *Strategies of Qualitative Enquiry* London: Sage

Department of Health (2012) *Start Active, Stay Active*, Chief Medical Officers of England, Scotland, Wales & Northern Ireland. London: Department of Health

de Vries, G. H. (1990) *De ontwikkeling van wetenschap*. Groningen: Wolters Noordhof. Cited in Biesta, G. J. J. (2010) *Good Education in an Age of Measurement: Ethics, Politics, Democracy*. London: Routledge.

Dionigi, R. A. (2010) Managing identity in later life through leisure: Interpreting the experiences of older athletes. In B.Humberstone, (Ed.) *Third Age Leisure Research: Principles and Practice*. LSA Publication No.108. Eastbourne: Leisure Studies Association.

Dionigi, R. A., Horton, S. and Bellamy, J. (2011) Meanings of Aging Among Older Canadian Women of Varying Physical Activity Levels. *Leisure Sciences* **33** 402 -419

- Dionigi, R. A. (2015) Stereotypes of Aging: Their Effects on the Health of Older Adults. *Journal of Geriatrics* Article ID954027 <http://dx.doi.org/10.1155/2015/954027> accessed 14/1/2018
- Dirkx, J. M. (2001) The Power of Feelings: Emotion, Imagination, and the Construction of Meaning in Adult Learning. *New Directions for Adult and Continuing Education*. 89 63 -72
- Dovey, C. (2015) What Old Age Is Really Like. Available from <http://www.newyorker.com/culture/cultural-comment/what-old-age-is> [Accessed 11 Jan 2016]
- Dumas, A., Laberge, S. and Straka, S. (2005) Older women's relations to bodily appearance: The embodiment of social and biological conditions of existence. *Ageing and Society* **25** 883 - 902
- Dustman, R. E., Emmerson, R. & Shearer, D. (1994) Physical activity, age and cognitive/neuropsychological function *Journal of Aging & Physical Activity* **2** 143 -181
- Ekerdt, D. J. and Koss, C. (2016) The Task of Time in Retirement. *Ageing & Society* **36** (6) 1295 -1311
- Elliott, A. (2014) *Concepts of the self*. Cambridge: Polity Press
- Ereaut, G. and Whiting, R. (2008) *What do we mean by 'Wellbeing'? And why might it matter?* Department for Children, Schools and Families Research Report No.DCSF-RW073, UK
- Estes, C. L. (1979) *The Aging Enterprise*. San Francisco: Jossey-Bass. Cited in Phillipson, C. (2013) *Ageing*. Cambridge: Polity
- Estes, C. L., Biggs, S. and Phillipson, C. (2003) *Social Theory, Social Policy and Ageing: A Critical Introduction*. Maidenhead: Open University Press.
- Evans, A. B. and Sleaf, M. (2012) You feel like people are looking at you and laughing: older adults' perceptions of aquatic physical activity. *Journal of Aging Studies* **26** (4) 515 -526
- Evers, A., Klusmann, V., Schwarzer, R. & Heuser, I. (2011) Improving cognition by adherence to physical or mental exercise: A moderated mediation analysis. *Ageing & Mental Health* **15** 4 446 – 455
- Fahlman, M., Morgan, A., McNevin, N., Topp, R. & Boardley, D. (2007). Combination training and resistance training as effectiveness interventions to improve functioning in elders. *Journal of Aging and Physical Activity* ,**15**, 195 -205.
- Fair, R. C. (2006) Estimated age effects in athletics events. *Experimental Aging Research* **33** 37 -57

Fairhurst, E. (1998) 'Growing old gracefully' as opposed to 'mutton dressed as lamb'. The social construction of recognising older women. In S. Nettleton & J. Watson (eds.) *The Body in Everyday Life*. Pp.258 -75 London: Routledge

Fanon, F. (1984, [1952]) *Black Skin, White Masks*. London: Pluto. Cited in Shilling, C. (2012) *The Body and Social Theory*. (third edition) London: Sage.

Featherstone, M. and Hepworth, M. (1991) The mask of ageing and the postmodern life course. In M. Featherstone, M. Hepworth and B. Turner (eds.) *The Body: Social process and cultural theory*. Pp.371 – 89 London: Sage Publications

Feldman-Barrett, L. (2006) Solving the emotion paradox: categorization and the experience of emotion. *Personality and social psychology review* **10** (1) 20 - 46

Fiatarone, M.A., Marks, E. C., Ryan, N.D., Meredith, C., Lipsitz, L. A. & Evans, W. J. (1988) High intensity strength training in nonagenarians *Journal of the American Medical Association* 263 3029 -3034

Fieldhouse, R. (1996) *A History of Modern British Adult Education* Leicester: National Institute of Adult Continuing Education

Finch, C. E. (1998) Variations in senescence and longevity include the possibility of negligible senescence. *Journal of Gerontology: Biological Sciences* **53A** B235 – B239

Finlay, L. and Gough, B. (eds.) (2003) *Reflexivity: a practical guide for researchers in health and social sciences*. Oxford: Wiley,Blackwell

Fotuhi, I., Do, D. and Jack, C. (2012) Modifiable factors that alter the size of the hippocampus with ageing. *National Review of Neurology* 8 (4) 189 -202

Frank, A. (1991) For a Sociology of the Body: an analytic review. In Featherstone, M., Hepworth, M. & B. S. Turner (eds.) *The Body, Social Process and Cultural Theory*. London: Sage Publications

Freeman, M. (2003a) Identity and differences in narrative inquiry: A commentary *Narrative Inquiry* **13** (2) 331 – 346 cited in Sparkes, A.C. & Smith, B. (2008) Narrative Constructionist Inquiry. In *Handbook of Constructionist Research* J. A Holstein and J. F. Gubrium (eds.) New York / London: The Guilford Press

Fries, J. F. (1980) Aging, Natural Death and the Compression of Morbidity. *The New England Journal of Medicine* **303** (3) 130 -135

Fromm, E. (1960) *Fear of Freedom*. London: Routledge and Kegan Paul. Cited in Stevens, R. (ed.) (1996) *Understanding the self* London: Sage

Gardner, M.M., Robertson, M.C. & Campbell, A.J. (2000) Exercise in preventing falls and fall related injuries in older people: a review of randomised control trials *British Journal of Sports Medicine* **34** 7-17

Geertz, C. (1973) *The Interpretation of Cultures: Selected Essays*. New York: Basic Books

Gergen, K. (1985) The social constructionist movement in modern psychology *American Psychologist* **40** 266 – 75

Gergen, K. (2000) *The Saturated Self: Dilemmas of Identity in Contemporary Life*. 2nd ed. New York: Basic Books

Gergen, K. (2009) *Relational being: beyond self and community*. New York: Oxford University Press.

Gergen, M. & Gergen, K. J. (2003) Positive Ageing. In Gubrium, J.F., Holstein, J.A. (eds.) (2003) *Ways of Aging*. Oxford: Blackwell.

Gergen, M. & Gergen, K. J. (2006) Narratives in action *Narrative Inquiry* **16** 112 -121

Giddens (1984) *The Constitution of Society. Outline of the Theory of Structuration*. Berkeley and Los Angeles: University of California Press.

Giddens, A. (1989) *Sociology*. 2nd ed. Cambridge: Polity Press

Giddens, A. (1990) *The Consequences of Modernity*. Cambridge: Polity Press. Cited in Hyde, M., Wiggins, R. D., Higgs, P. and Blane, D. B. (2003) A measure of quality of life in early old age: the theory, development and properties of a needs satisfaction model (CASP19) *Ageing & Mental Health* 2003, 7 (3) 186 -194

Giddens, A. (1991) *Modernity and Self –Identity: Self and Society in the Late Modern Age* Cambridge: Polity Press

Gillard, S. (2012) *Why do more men not participate in adult learning creative studies courses? A case study*. Unpublished undergraduate dissertation: Oxford Brookes University

Gilleard and Higgs (2000) *Cultures of Ageing: Self, Citizen and the Body*. London: Prentice Hall.

Gilleard and Higgs (2005) *Contexts of Ageing: Class, Culture and Community*. Cambridge: Polity

Gilleard, C., and Higgs, P. (2007) The third age and the baby boomers. Two approaches to the social structuring of later life. *International Journal of Ageing and Later Life* **2** (2) 13-30

Gilleard, C. and Higgs, P. (2010) Ageing without agency: theorizing the fourth age. *Ageing and Mental Health* **14** (2) 121 - 128

- Goffman, E. (1959) *The Presentation of Self in Everyday Life*. London: Penguin.
- Goffman, E. (1963) *Stigma* Englewood Cliffs NJ: Prentice-Hall
- Goffman, E. (1968b) *Asylums. Essays on the Social Situation of Mental Patients and Other Inmates*. Harmondsworth: Pelican.
- Goffman, E. (1975) *Frame Analysis. An Essay on the Organisation of Experience*. Harmondsworth: Pelican.
- Goldsmith, J. (2010) An Optimistic Vision for a Graying Generation. In *Aging* (6th edition) Moody, H. R. Thousand Oaks, CA.: Sage Publications
- Grant, B. C. (2001) 'You're never too old': beliefs about physical activity and playing sport in later life. *Ageing & Society* **21** (6) 777 -798
- Grant, B. C. (2008) An insider's view on physical activity in later life *Psychology of Sport and Exercise* **9** 817 - 829
- Green. K. (2002) Lifelong participation. Physical education and the work of Ken Roberts *Sport, Education and Society* **7** (2) 167 -182
- Greig, C. (2002) The trainability of elderly people. *Age & Ageing* **31** 223 -4
- Griffin, M. (2010) Setting the scene: hailing women into a running adentity. *Qualitative Research in Sport and Exercise* **2** 2 153 – 174
- Griffiths, I. (2011) Older women unhappy over their portrayal in films, survey shows. *The Guardian*, 28 March. Available at www.guardian.co.uk/film/2011/mar28/women-unhappy-portrayal-films-survey Cited in Shilling, C. (2012) *The Body and Social Theory*. (third edition) London: Sage.
- Gross, J. (2008) Emotion regulation. In M. Lewis, J. M. Haviland-Jones and L. Feldman-Barrett (eds.) *Handbook of Emotions*. New York, NY: Guilford Press 497 - 512
- Grosz, E. (1994) Volatile bodies: toward a corporeal feminism. St. Leonard's: Allen and Unwin. Cited in Griffin, M. (2010) Setting the scene: hailing women into a running identity. *Qualitative Research in Sport and Exercise* **2** 2 153 – 174
- Grundy, E. (2002) Ageing and vulnerable elderly people in Europe. In Ageing, Intergenerational Solidarity and Age-specific Vulnerabilities. Report of Network for Integrated European Studies (NIEPS) workshop, Bundesinstitut fur Bevölkerungsforschung, Wiesbaden, Germany 11 -39. Cited in Bowling, A., See-Tai, S., Ebrahim, S., Gabriel, z. & Solanki, P. (2005) Attributes of age-identity. *Ageing & Society*, **25** 479 -500
- Guba, B. G. and Lincoln, Y. S. (1994) Competing paradigms in qualitative research *Handbook of Qualitative Research* pp.105 – 117 London: Sage

- Gubrium, J. F., Holstein, J. A. & Buckholdt, D. R. (1994) *Constructing the Life Course*. New York: General Hall Inc.
- Gubrium, J. F., Holstein, J. A. (eds.) (2003) *Ways of Aging*. Oxford: Blackwell.
- Gubrium, J. F., and Silverman, D. (1989) *The politics of field research: Sociology beyond enlightenment* London: Sage
- Gullette, M.M. (2004) *Aged by Culture*. Chicago: University of Chicago Press
- Hagberg, L. A., Lindahl, B., Nyberg, L. and Hellénus, M-L. (2009) Importance of enjoyment when promoting physical exercise. *Scandinavian Journal of Medicine and Science in Sports* 19 740 - 747
- Hammersley, M. & Atkinson, P. (1983) *Ethnography: principles in practice*. London: Sage
- Hammersley, M. & Atkinson, P. (1995) *Ethnography*. London, Routledge
- Handcock, P. & Jenkins, C. (2003) The Green Prescription: a field of dreams? *The New Zealand Medical Journal* Vol. 116 No 1187. Available from <http://journal.nzma.org.nz/journal/116-1187/713> [Accessed 9 September, 2013.]
- Harré, R. (1983) *Personal Being: A Theory for Individual Psychology*. Oxford, Basil Blackwell. Cited in Jenkins, R. (2014) *Social Identity Fourth edition* Abingdon: Routledge
- Harré, R. (1998) *The Singular Self: An introduction to the psychology of personhood* London: Sage
- Harland, J., White, M., Drinkwater, C. et al. (1999) The Newcastle exercise project: a randomized controlled trial of methods to promote physical activity in primary care *British Medical Journal* **319** 828 - 832
- Hartman-Stein, P. E. & Polkanowicz, E. S. (2003) Behavioural determinants of healthy aging: good news for the baby boomer generation. *Online Journal of Issues in Nursing* **8** 6 Cited in Bowling, A., See-Tai, S., Ebrahim, S., Gabriel, z. & Solanki, P. (2005) Attributes of age-identity. *Ageing & Society*, **25** 479 -500
- Haughton McNeill, L., Kreuter, M. W. and Subramanian, S. V. (2006) Social environment and physical activity: A review of concepts and evidence. *Social Science Medicine* **63** (4) 1011 - 1022
- Havighurst, R. J. (1963) Successful aging. In R. H. Williams, C. Tibbetts & W. Donohue (eds.) *Processes of Aging*, pp.299 -320. Cited in Jamieson, A. & Victor, C. (eds.) (2002) *Researching Ageing and Later Life*. Buckingham: Open University Press.

Hawley, H., Skelton, D. A., Campbell, M. and Todd, C. (2012) Are the attitudes of exercise instructors who work with older adults influenced by training and personal characteristics? *Journal of Aging and Physical Activity* **20** 47 - 63

Hawley-Hague, H., Horne, H., Campbell, M., Demack, M., Skelton, S. & Todd, D. A. (2013) Multiple levels of influence on older adults' attendance and adherence to community exercise classes. *The Gerontologist* available from <http://gerontologist.oxfordjournals.org/content/early/2013/07/27/geront.gnt075.abstract> [Accessed 19/12/13]

Healey, T. & Ross, K. (2002) Growing Old invisibly: older viewers talk television. *Media, Culture & Society*, **24** 1, 105 – 120

Health Education Authority, (1999) Physical Activity and Inequalities. A briefing paper. Available from www.hea.org.uk [Accessed 3.2.12.]

Health Survey England (2008) available from www.nhs.gov.uk [Accessed 7/11/2013]

Health Survey England (2012) available from www.nhs.gov.uk [Accessed 7/11/2013]

Henwood, T., Tuckett, A., Edelstein, O. and Bartlett, H. (2011) Exercise in later life: The older adults' perspective about resistance training. *Ageing and Society* **31** 1330 – 1349

Hepworth, M. (2000) *Stories of Ageing* Buckingham: Open University Press

Heuser, L. (2005) We're not too old to play sports. The career of women lawn bowlers. *Leisure Studies* **24** (1) 45 - 60

Higgs, P., Leontowitsch, M., Stevenson, F., and Rees Jones, I. (2009) Not just old and sick - the 'will to health' in later life *Ageing and Society* **29** (5) 687-707

Hill, A. (2017) Flexible retirement age: an idea whose time has come? *The Guardian* 06 Feb. 2017

Hockey, J. and Allen Collinson, J. (2007) Grasping the phenomenology of sporting bodies. *International review for the sociology of sport* **42** 2 115 - 131

Hockey, J. and James, A. (2003) *Social Identities Across the Life Course*. London: Palgrave Macmillan

Hockley, A. and McCormack, F. (2016) Walking for wellbeing and health. A sustainable option for an ageing population. In B.Humberstone and M. Konstantaki (eds.) *Ageing, Physical Activity, Recreation and Wellbeing*. Newcastle-on-Tyne: Cambridge Scholars Publishing.

Hogan, C. L., Mata, J. and Carstensen, L. L. (2013) Exercise holds immediate benefits for affect and cognition in young older adults *Psychology of Aging* **28** (2) 587 - 594

- Holstein, J. & Gubrium, J. (1999) *The Self We Live By*. Oxford: Oxford University Press.
- Horton, S., Baker, J. and Deakin, J. M. (2007) Stereotypes of aging: their effects on the health of seniors in North American Society. *Educational Gerontology* **33** (12) 1021 - 1035
- Howe, T. E., Rochester, L., Neil, F., Skelton, D.A. & Ballinger, C. (2011) Exercise for improving balance in older people. Cochrane database *Systems Review* 2011 (11)
- Howell, F. and McKenzie, J. (1987) High school athletics and adult sport-leisure activity: Gender variations across the lifecycle. *Sociology of Sport Journal* **4** 329 -346 In J. Curtis, W. McTeer, and P. White, (1999) Exploring Effects of School Sport Experiences on Sport Participation in Later Life. *Sociology of Sport Journal* **36** 348 -365
- Howes, D. (2003) *Sensual relations: Engaging the senses in cultural and social theory*. Ann Arbor: University of Michigan Press.
- Howson, A. (2004) *The Body in Society: An Introduction*. Cambridge: Polity
- Howson, A. (2013) (second edition) *The Body in Society: An Introduction*. Cambridge: Polity.
- Hubley, A. M. and Russell, L. B., (2009) Prediction of subjective age, desired age and age satisfaction in older adults: Do some health dimensions contribute more than others? *International Journal of Behavioural Development* **33** (1) 12 – 21
- Hudson, J., Day, M. C. and Oliver, E. J. (2015) A ‘new life’ story or ‘delaying the inevitable’? Exploring older people’s narratives during exercise uptake. *Psychology of Sport and Exercise* **16** 112 - 120
- Humberstone, B. (2011) Embodiment and social and environmental action in nature-based sport: spiritual spaces. *Leisure Studies* **30** 4 495 -512
- Humberstone, B and Cutler Riddick, C. (2014) Older women, embodiment and yoga practice. *Ageing and Society* **1** - 21
- Humberstone, B. and Stuart, S. A. (2016) Older Women, Exercise to Music, and Yoga: Senses of Pleasure? *Journal of Aging and Physical Activity*. **24** 412 -418
- Hung, L., Kempen, G. I. J. M. & De Vries, N. K. (2010) Cross-cultural comparison between academic and lay views of healthy ageing: A literature review. *Ageing & Society* **30** 1373 – 1391
- Hunter, G. R. McCarthy, J. P. and Bauman, M. M. (2004) Effects of resistance training on older adults. *Sports Medicine* **34** 329 – 348
- Hurd, L. (1999) ‘We’re not old!’ Older women’s negotiation of aging and oldness. *Journal of Aging* **13** (4) 419 -439

Hurd Clarke, L. and Griffin, M. (2008) Visible and invisible ageing: beauty work as a response to ageism. *Ageing & Society* **28** 653 -674

Hurd Clarke, L., Griffin, M. & Maliha, K. (2009) Bat wings, bunions and turkey wattles: body transgressions and older women's strategic clothing choices. *Ageing & Society*, **29** 5, 790 - 826

Hurd Clarke, L. and Bennett, E. (2012) Constructing the moral body: Self-care among older adults with multiple chronic conditions. *Health* **17** (3) 211 -228

Hurd Clarke, L. and Bennett, E. (2013) 'You learn to live with all the things that are wrong with you': gender and the experience of multiple chronic conditions in later life. *Ageing Society* **33** (2) 342 – 360

Hurd Clarke, L. and Bennett, E.V. (2015) Gender, ageing and appearance. In J. Twigg and W. Martin (eds.) *Routledge Handbook of Cultural Gerontology* 133 - 140

Hurd Clarke, L. and Korotchenko, A. (2011) Ageing and the Body: A Review. *Canadian Journal of Aging* **30** (3) 495 -510

Hurd Clarke, L. and Korotchenko, A. (2016) 'I know it exists...but I haven't experienced it personally': older Canadian men's perceptions of ageism as a distant social problem. *Ageing and Society* **36** (8) 1757 -1773

Hurd Clarke, L. and Lefkovich (2018) 'I don't really have any issue with masculinity'. Older Canadian men's perceptions and experiences of embodied masculinity. *Journal of Aging Studies*

Hyde, M., Wiggins, R. D., Higgs, P. and Blane, D. B. (2003) A measure of quality of life in early old age: the theory, development and properties of a needs satisfaction model (CASP19) *Ageing & Mental Health* 2003, 7 (3) 186 -194

Ingold, T. (2000) *The Perception of the Environment: Essays on Livelihood, Dwelling and Skill*. London: Routledge

Ingram, D. and Henshall, P. (2008) *The News Manual. A professional resource for journalists and the media*. Available from <https://www.thenewsmanual.net> accessed 2/12/2017

Jackson, A. S., Sui, X., Hebert, J. R., Church, T. S. and Blair, S. N. (2009) Fitness levels decline with age, especially after 45 *ScienceDaily* Retrieved December 5, 2013 from <http://www.sciencedaily.com/releases/2009/10/091026161846.htm>

Jallinoja, P., Pajari, P. & Absetz, P. (2010) Negotiated Pleasures in health-seeking lifestyles of participants of a health promoting intervention. *Health* **14** (2) 115 - 130

James, W. (1961,[1892]) *Psychology: The Briefer Course*. New York: Harper & Brothers. Cited in Holstein, J. A. & Gubrium, J. F. *The Self We Live By* Oxford: Oxford University Press.

Jamieson, A. & Victor, C. (eds.) (2002) *Researching Ageing and Later Life*. Buckingham: Open University Press.

Jankowski, g., Diedrichs, P. C., Williamson, H. and Gary, C. (2014) Looking age-appropriate while growing old gracefully: A qualitative study of ageing and body image among older adults. *Journal of Health Psychology* **11** 1-12

Jebb, S. (2015) *Oral evidence: Impact of physical activity and diet on health HC845* House of Commons Health Committee 3 Feb.2015

Jenkins, R. (2014) *Social Identity* 4th ed. Abingdon: Routledge

Jones, R. L. (2006) 'Older people' talking as if they are not older people. Positioning theory as an explanation. *Journal of Aging Studies* **20** (1) 79 - 81

Jones, I. R., Hyde, M., Victor, C., Wiggins, R., Gilleard, C. and Higgs, P. (2008) *Ageing in a Consumer Society: From Passive to Active Consumption in Britain*. Bristol: Policy Press.

Jullien, F. (2011) *The Silent Transformations*. London: Seagull Books.

Kafková, M. P. (2016) The 'Real' Old Age and the Transition between the Third and Fourth Age. *Sociológia* **48** (6) 622 -6

Kallinen, Mauri. (2005) Cardiovascular Benefits and Potential Hazards of Physical Exercise in Elderly People. *Journal of Sports Science & Medicine* 4, supplementum 7 (2005): 1 51.

Katz, S. (2002) Growing Older Without Aging? Positive Aging, Anti-Ageism, and Anti-Aging. *Generations*, **25** (4) 27 -32

Katz, S. (2000) Busy Bodies. Activity, Aging and the Management of Everyday Life. *Journal of Aging Studies* 14 2 135 – 153

Kelly, J. (1980) Leisure and Sport Participation. In D. Smith and J. Macauley (eds.) *Participation in Social and Political Activities* (pp. 170 – 176) San Francisco: Jossey-Bass.

Kilgore, D. W. (2001) Critical and Postmodern Perspectives on Adult Learning. *New Directions for Adult and Continuing Education*. 89 33 - 61

King, A.C., Taylor, C.B., Haskell, W.L. & Debusk, R.F. (1989) The influence of regular aerobic exercise on psychological health: A randomized, controlled trial of healthy middle-aged adults. *Health Psychology*, **8** 305-324

King, A.C., Taylor, C.B. & Haskell, W.L. (1993) Effects of differing intensities and formats of 12 months of exercise training on psychological outcomes in older adults. *Health Psychology* **12** 4 292 – 300

Kirkwood, J. (2009) Motivational factors in a push-pull theory of entrepreneurship. *Gender in Management: An International Journal* **24** (5) 346 -364

Kirkwood, T. (2001) Brave Old World. Lecture 1 The End of Age. The Reith Lectures 2001. British Broadcasting Corporation, London. Available online at www.bbc.co.uk/radio4/reith2001/lecture1.shtml [Accessed 9 November 2005] Cited in Townsend, J., Godfrey, M. & Denby, T. (2006) Heroines, villains and victims: older people's perceptions of others. *Ageing & Society*, **26** 883 – 900

Kluge, M. A. (2002) Understanding the essence of a physically active lifestyle: a phenomenological study of women 65 and older. *Journal of Aging and Physical Activity* **10** 4 – 27

Klusmann, V., Evers, A., Schwarzer, R., Heuser, I. (2012) Views on aging and emotional benefits of physical activity. Effects of an exercise intervention in older women. *Psychology of Sport & Exercise*. **13**(2):236-242

Knapton, M. (2015) *Oral evidence: Impact of physical activity and diet on health* HC845 House of Commons Health Committee 3 Feb. 2015

Knight, S., Bermingham, M. A. and Mahajan, D. (1999) Regular non-vigorous exercise and cholesterol levels in the elderly *Gerontology* **45** 213 - 219

Knowles, M. S. (1968) Andragogy, Not Pedagogy *Adult Leadership* **16** (10) 350-352, 386

Knowles, M. S. (1980) *The Modern Practice of Adult Education: From Pedagogy to Andragogy*. (2nd ed.) New York: Cambridge Books

Kohl, H.W., Craig, C. L., Lambert, E. V., Inoue, S., Alkandari, J. R., Leetongin, G. & Kahlmeier, S. (2012) The pandemic of physical activity: global action for public health. *The Lancet* **380** (9838), 294 -305

Kohli, M. (1988) Ageing as a challenge for sociological theory. *Ageing and Society* **8** 367 -394

Kolland, F. (2016) *Identity Work and Lifelong Learning in Ageing Societies*. Keynote address at A. E. A. conference. 5th April, 2016. Open University, Milton Keynes

Kornadt, A. E. and Rothermund, K. (2011) Contexts of aging: assessing evaluative age stereotypes in different life domains. *Journals of Gerontology Series B: Psychological Sciences and Social Sciences* **66** (5) 547 - 556

- Korotchenko, A. and Hurd Clarke, L. (2016) Canadian power mobility device users' experiences of ageing with mobility impairments. *Ageing and Society* 36 1238 - 1253
- Kosma, M., Buchanan, D. R. and Hondzinski, J. (2015) The role of values in promoting physical activity. *Quest* 67 241 – 254
- Kvale, S and Brinkmann, S. (2009) *Interviews*. Thousand Oaks: Sage
- Larson, R. (1978) Thirty years of research on the subjective well-being of older Americans. *The Gerontologist* 33 109 -25
- Laslett, P. (1989) *A Fresh Map of Life*. London: Weidenfeld and Nicolson.
- Laverty, S. M. (2003) Hermeneutic Phenomenology and Phenomenology: A Comparison of Historical and Methodological Considerations. *International Journal of Qualitative Methods* 2 (3), 1 - 29
- Laz, C. (1998) Act Your Age. *Sociological Forum*. 13 1, 85 -113
- Laz, C. (2003) Age Embodied. *Journal of Aging Studies*. 17 (4) 503 – 19
- Lazarus, R. (1999) *Stress and emotion: a new synthesis*. New York: Springer
- Lecompte, M. D. & Preissle, J. (1993) *Ethnography and qualitative design in educational research*. Bingley: Emerald
- Leder, D. (1990) *The Absent Body*. Chicago IL.: University of Chicago Press. Cited in Shilling, C. (2012) *The Body and Social Theory*. (third edition) London: Sage.
- Lee I-M., Shiroma, E. J., Lobelo, F., Puska, P., Blair, F. N. and Katzmarzyk, P. T. for The Lancet Physical Activity Working Group (2012) Effect of physical activity on major non-communicable diseases worldwide: an analysis of burden of disease and life expectancy. *Lancet* 380 (9838) 219 – 229
- Lee, J. and Ingold, T. (2006) Fieldwork on Foot: Perceiving, Routing, Socialising. In S. Coleman and P. Collins (eds.) *Locating the Field, Space, Place and Context in Anthropology* 67 – 85 Oxford: Berg
- Levi, P. (1975, 2000) *The Periodic Table*. London: Penguin Books.
- Liechty, T. and Yarnal, C. M. (2010) Older women's body image: a lifecourse perspective. *Ageing and Society* 30 (7) 1197 -1218
- Lincoln, Y. and Guba, E. (1985) *Naturalistic Inquiry*. Thousand Oaks, CA: Sage
- Lofland, J. & Lofland L. H. (1995) *Analyzing Social Settings: a guide to qualitative observation and analysis* Belmont CA.: Wadsworth Publishing Company

- Lorber, J. and Moore, L. J. (2007) *Gendered Bodies: Feminist Perspectives*. Los Angeles: Roxbury Press
- Lövgren, K. (2012) 'They See Themselves As Young'. The Market Addressing the Older Consumer. In V. Ylännä (ed.) *Representing Ageing. Images and Identities*. Basingstoke: Palgrave Macmillan.
- Lund, A. and Engelsrud, G. (2008) 'I am not *that* old'. Interpersonal experiences of thriving and threats at a senior centre *Ageing and Society* **28** (5) 675 – 692
- MacIntyre, A. (1985) *After Virtue: A Study in Moral Theory*. London: Duckworth. Cited in Jenkins, R. (2014) *Social Identity* 4th ed. Abingdon: Routledge.
- Mahncke, H. W., Connor, B. B., Appelman, J. Ahsanuddin, O. N., Hardy, J. L., Wood, B. A. et al. (2006) Memory enhancement in healthy older adults using a brain plasticity-based programme: a randomized controlled study. *Proceedings of the National Academy of Sciences USA* **103** (33) 12523 -12528
- Malbut, K., Dinan, S. & Young, A. (2002) Aerobic training in the 'oldest old': the effect of 24 weeks of training. *Age & Ageing* **31** 255 – 60 Cited in Bowling, A., See-Tai, S., Ebrahim, S., Gabriel, z. & Solanki, P. (2005) Attributes of age-identity. *Ageing & Society*, **25** 479 -500
- Malina, R. M. (1996) Tracking of physical activity and physical fitness across the lifespan. *Research Quarterly for Exercise and Sport* **67** (Suppl.3) 48 -57. In J. Curtis, W. McTeer, and P. White, (1999) Exploring Effects of School Sport Experiences on Sport Participation in Later Life. *Sociology of Sport Journal* 36 348 -365
- Mannheim, K. (1952) The problem of generation, in Kecskemeti (ed.) *Essays on the Sociology of Knowledge*. London: Routledge. Cited in Jones, I. R., Hyde, M., Victor, C., Wiggins, R., Gilleard, C. and Higgs, P. (2008) *Ageing in a Consumer Society: From Passive to Active Consumption in Britain*. Bristol: Policy Press.
- Mantzoukas, S. (2004) Issues of representation within qualitative inquiry. *Qualitative Health Research* 14, 994
- Markula, P., Grant, B.C. & Denison, J. (2001) Qualitative research and aging and physical activity: multiple ways of knowing. *Journal of Aging and Physical Activity*, **9**, 245 -264
- Martin, L. G., Freedman, V. A., Schoeni, R. F. & Andreski, P. M. (2009) Health and Functioning Among Baby Boomers Approaching 60. *Journal of Gerontology B Psychological Sciences & Social Sciences* **64B** (3) 369 -377
- Marwick, A. (1998) *The Sixties*. Oxford: Oxford University Press.
- Marwick, A. (2003) *British Society since 1945* London: Penguin Books

- Mason, J. (2002) *Qualitative Researching* London: Sage
- Maslow, A. H. (1968) *Toward a Psychology of Being* (second edition) Princeton NJ: Nostrand. Cited in Hyde, M., Wiggins, R. D., Higgs, P. and Blane, D. B. (2003) A measure of quality of life in early old age: the theory, development and properties of a needs satisfaction model (CASP19) *Ageing & Mental Health* 2003, 7 (3) 186 -194
- Mathews, A.E., Laditka, S.B., Laditka, J.N., Wilcox, S., Corwin, S.J., Liu, R., Friedman, D.B., Hunter, R., Tseng, W. & Logsdon, R. G. (2010) Older Adults' Perceived Physical Activity Enablers and Barriers: A multicultural perspective. *Journal of Aging and Physical Activity*, 18, 119 – 140
- Mauss, M. (1985) *A Category of the Human Mind: The Notion of Person; the notion of self.* Cited in Jenkins, R. (2014) *Social Identity* 4th ed. Abingdon: Routledge
- Maykut, P. S. and Morehouse, R. E. (1994) *Beginning Qualitative Research: a philosophic and practical guide.* London: Falmer Press
- Mazzaroi, T. and Soutar, G.N. (2002) 'Push-pull' factors influencing international student destination choice *International Journal of Educational Management*, 16 (2) 82 -90
- McCarthy and Stone (2015) *The Colour Report* available from <https://www.mccarthyandstone.co.uk/colour-report> [Accessed 23 Nov. 2015]
- McEwan, E. (1993) (ed.) *Age: The Last Discrimination.* London: ACE Books. Cited in Walker, A. (2002) A Strategy for Active Ageing. *International Social Security Review*.55 1 121 -139
- McGannon, K. R. and Smith, B. (2014) Centralizing culture in cultural sport psychology research: The potential of narrative inquiry and discursive psychology. *Psychology of Sport and Exercise*, 17 79 - 87
- McMunn, A., Nazroo, J., Morten, W., Breeze, E. & Zaninotto, P. (2009) Participation in socially-productive activities, reciprocity and well-being in later life: baseline results in England. *Ageing & Society*. 29, 765 -782
- McMurdo, M. (2000) A healthy old age: realistic or futile goal? *British Medical Journal* **321**, 1148 -51 Cited in Bowling, A., See-Tai, S., Ebrahim, S., Gabriel, z. & Solanki, P. (2005) Attributes of age-identity. *Ageing & Society*, **25** 479 -500
- Mead, G.H. (1934, 2015) *Mind, Self & Society. The Definitive Edition.* London: University of Chicago Press
- Merleau-Ponty, M. (1962) *The Phenomenology of Perception.* London: Routledge Kegan Paul. Cited in Craib, I. (1998) *Experiencing Identity* London: Sage

Merriem, S. B. (2001) Andragogy and Self-directed learning: Pillars of Adult Learning Theory. *New Directions for Adult and Continuing Education*. 89 3 – 13

Mezirow, (1991) *Transformative Dimensions of Adult Learning*. San Francisco, Jossey-Bass.
Cited in Baumgartner, L. M. (2001) An Update on Transformational Learning *New Directions for Adult and Continuing Education*. 89 15 -24

Mezirow, J. and Associates (2000) *Learning as Transformation: Critical Perspectives on a Theory in Progress*. San Francisco: Jossey-Bass

Minichiello, V., Browne, J. & Kendig, H. (2000) Perceptions and consequences of ageism: views of older people. *Ageing & Society*, **20** 253 -278

Mullan, P. (2002) *The Imaginary Time Bomb: Why An Ageing Population Is Not a Social Problem*. London: L. B. Tauris.

Munro, J., Brazier,, J., Davey, R. and Nicholl, J. (1997) Physical activity for the over 65s: could it be a cost-effective exercise for the NHS? *Journal of Public Health Medicine* **19** 397 - 402

Neff, K. (2003) Self-compassion: An alternative conceptualization of a healthy attitude toward oneself. *Self and Identity* 2 85 - 101

Nelson, T. D. (ed.) (2004) *Ageism: Stereotyping and prejudice against older persons*. Cambridge, Mass.: MIT Press.

Nettleton, S. (2015) Fell-running in later life: Irresponsible intoxication or existential capital? In E. Tulle & C. Phoenix (eds.) *Physical Activity and Sport in Later Life. Critical Perspectives*. Basingstoke: Palgrave Macmillan.

NHS Choices (2014) accessed 1/4/14

Nikander, P. (2009) Doing change and continuity: age identity and the micro-macro divide *Ageing and Society* **29** 863-881

Nimrod, G. (2007) Retirees' Leisure: Activities, Benefits and their Contribution to Life Satisfaction *Leisure Studies* **26** 1 65 – 80

Norrick, N. R. (2009) The construction of multiple identities in elderly narrators' stories *Ageing & Society*, **29** (6) 901 - 25

Northey, J., Cherbuin, Pumpa, Smee and Rattray, (2017) Exercise interventions for cognitive function in adults over 50: a systematic review with meta-analysis *OnlineFirst* 24 Apr. 2017 *British Journal of Sports Medicine* doi.10.1136/bjsports 2016-096587 Accessed 26/4/2017

O'Brien Cousins, S. (2001) Thinking out loud: what older adults say about triggers for physical activity. *Journal of Aging and Physical Activity* **9** 347 - 363

- O'Brien Cousins, S. & Edwards, K. (2002) Alice in menopauseland: the Jabberwocky of a medicalized middle age. *Health Care for Women International* 23 4 325 -343
- Oberg, P. (1996) The Absent Body: A Social Gerontological Paradox. *Ageing & Society*, 16 701 - 719
- Oberg, P. & Tornstam, L. (2001) Youthfulness and fitness: identity ideals for all ages? *Journal of Aging and Identity* 6 (1), 15 -29
- Office for National Statistics (2013) www.ons.gov.uk accessed 1/4/2014
- Office for National Statistics (2017) www.ons.gov.uk/peoplepopulationandcommunity accessed 26/5/2017
- Olshansky, S. J., Carnes, B. A. and Grahn, D. (1998) Confronting the boundaries of human longevity. *American Scientist* 86 52 - 61
- Oliver, E. J., Hudson, J. and Thomas, L. (2016) Processes of identity development and behaviour change in later life: exploring self-talk during physical activity uptake. *Ageing and Society* 36 (7) 1388 -1406
- Osborne, J. W. (2012) Psychological effects of the transition to retirement. *Canadian Journal of Counselling and Psychotherapy* 46 (1) 45 - 58
- Ostroff, J. (1989) Successful marketing to the 50+ consumer: How to capture one of the biggest growing markets in America. New Jersey: Prentice Hall. Cited in Sawchuk, K. A. (1995) From Gloom to Boom: Age, Identity and Target-marketing. In M. Featherstone and A. Wernick (eds.) *Images of Aging: Cultural Representations of Later Life*. London: Routledge.
- Oxford English Dictionary O.E.D. first entry of 'lifestyle' Adler, A. (1929)
- Paffenbarger, R. S. Jr., Hyde, R. T., Wing, A. L. & Hsieh, C. C. (1986) Physical activity, all-cause mortality and longevity of college alumni *New England Journal of Medicine* 314 605 -613
- Paulson, S. (2005) How various 'cultures of fitness' shape subjective experiences of growing older. *Ageing & Society* 25 2 229 -244
- Payne, G. & Payne, J. (2004) *Key concepts in Social Research* London: Sage
- Phillipson, C. (1982) *Capitalism and the social construction of old age*. London: Macmillan
- Phillipson, C. (1998) *Reconstructing Old Age*. London: Sage
- Phillipson, C., Leach, R., Money A-M. and Biggs, S. (2008) Social and Cultural Constructions of Ageing: The Case of the Baby Boomers. *Sociological Research Online* 13 (5) available from <http://www.socresonline.org.uk/13/3/5.html> [Accessed 12/09/2012]
- Phillipson, C. (2013) *Ageing*. Cambridge: Polity.

Phoenix, C. and Grant, B. (2009) Expanding the agenda for research on the physically active aging body. *Journal of Aging and Physical Activity* 17 362 - 379

Phoenix, C. and Orr, N. (2014) Pleasure: A forgotten dimension of physical activity in older age. *Social Science and Medicine* 115 94 - 102

Phoenix, C. and Orr, N. (2015) The multidimensionality of pleasure in later life physical activity. In *Physical Activity and Sport in Later Life*. Tulle, E. and Phoenix, C. (eds.) Basingstoke: Palgrave Macmillan.

Phoenix, C. and Smith, B. (2011) Telling a (good?) counter-story of ageing: natural body-building meets the narrative of decline. *The journals of gerontology series B: psychological sciences and social sciences* 66B (5) 628 -639

Phoenix, C. and Sparkes, A. (2006) Keeping it in the family: Narrative maps of ageing and young athletes' perceptions of their future. *Ageing & Society* 26 631 -648

Phoenix, C. and Tulle, E. (2018) Physical Activity and Ageing. In J. Piggan, L. Mansfield and M. Weed (eds.) *Routledge Handbook of Physical Activity, Policy and Practice*. London: Routledge.

Pila, E., Brunet, J., Crocker, P. R. Kowalski, K. C. and Sabiston, C. M. (2016) Intrapersonal characteristics of body-related guilt, shame, pride and envy in Canadian adults. *Body Image* 16 100 - 106

Piran, N. (2016) Embodied paths in aging: Body journeys towards enhanced agency and self-attunement. *Women and Therapy* 39 186 - 201

Polkinghorne, D. (1983) *Methodology for the Human Sciences. Systems of inquiry*. Albany, NY: State University of New York Press.

Polvika, L. and Longine, C. (2006) The emerging postmodern culture of aging and retirement security. In J. Baars, D. Dannefer, C. Phillipson and A. Walker (eds.) *Aging, Globalisation and Inequality: The new critical gerontology*. 183 – 204 New York: Baywood Wood

Pretty, J., Griffin, M., Peacock, J., Hine, R., Sellens, M. and South, N. (2005) *A countryside for Health and Wellbeing: The Physical and Mental Health Benefits of Green Exercise*. Countryside Recreation Network

Public Health England: National Travel Survey (2014) available from <https://www.gov.uk> [Accessed 15/3/15]

Public Health, England, (2014) *Everybody Active, Every Day*. London: PHE publications

Punch, K. F. (2006) *Developinbg Effective Research Proposals* (2nd ed.) London: Sage

- Quénart, A. and Charpentier, M. (2012) Older women and their representations of old age: a qualitative analysis. *Ageing and Society* **32** 984-1007
- Ralston, A. (2005) *Between a rock and a hard place*. London: Pocket Books.
- Rennie, D. L. (2012) Qualitative Research as Methodical Hermeneutics. *Psychological Methods* **17** (3) 385 - 98
- Resnik, N. M. (1997) How should clinical care of the aged differ? *Lancet* **350** 1157 – 8 Cited in Bowling, A., See-Tai, S., Ebrahim, S., Gabriel, z. & Solanki, P. (2005) Attributes of age-identity. *Ageing & Society*, **25** 479 -500
- Reynolds, J. (2014) Stories of Creative Ageing Working with Older People *Generations Review* **19** (1) 38 - 40
- Richardson L. (2000) Writing: A method of inquiry. In N. Denzin and Y. Lincoln (eds.) *Handbook of Qualitative Research* (2nd ed.) pp. 923 - 948
- Rizzuto, D., Orsini, N., Qui, C., Wang, H. & Fratiglioni, L. (2012) Lifestyle, social factors and survival after age 75: population based study. *British Medical Journal*. Available from <http://www.bmj.com> [Accessed 2 September, 2012.]
- Rhodes, R. E., Martin, A. D., Taunton, J. E., Rhodes, E. C., Donnelly, M & Elliot, J. (1999) Factors associated with exercise adherence among older adults. An individual perspective. *Sports Medicine* **6**, 397 -411
- Roberts, K. (2004) *The Leisure Industries* Basingstoke: Palgrave Macmillan
- Robinson, D. & Groves, J. (1999) *Philosophy*. Cambridge: Icon Books Ltd.
- Rodaway, P. (1994) *Sensuous Geographies: Body, Sense and Place*. London: Routledge.
- Rojek, C. (2005) *Leisure Theory. Principles and Practice*. Basingstoke: Palgrave Macmillan.
- Ross, N., Renold, E., Holland, S. & Hillman, A. (2009) Moving stories. Using mobile methods to explor the everyday lives of young people in public care. *Qualitative Research*, **9**. 605 -623
- Rowe, J. W. & Cosco, T. D. (2016) Successful Aging. In Bengtson, V. & Settersten, R. A. (eds.) (2016) *Handbook of Theories of Aging*. New York: Springer Publishing Company.
- Rowe, J. W. and Kahn, R. L. (1997) Human Aging: usual and successful. *Science* **237** 143 – 9
- Rowe, J. W. and Kahn, R. L. (1997) Successful Aging. *The Gerontologist*, **37** 4, 433 -40
- Rozario, P. A. and Derienzis, D. (2009) ‘So forget how old I am!’ Examining age identities in the face of chronic conditions. *Sociology of Health and Illness*. **31** (4) 540 - 553

- Rumsey, N. and Harcourt, D. (2005) *The Psychology of Appearance* Berkshire: Open University Press
- Ryff, C. D. (1989) In the eye of the beholder: Views of psychological well-being among middle-aged and older adults. *Psychology and Aging* **4** 195 - 210
- Ryle, G. (1949, 1963) *The Concept of the Mind*. Harmondsworth, Peregrine. Cited in Burkitt, I. (2008) *Social Selves. Theories of Self and Society*. 2nd ed. London: Sage
- Saldaña, J. (2009) *The Coding Manual for Qualitative Researchers in Health and Social Sciences*. London: Sage.
- Sarbin, T. (2005) If these walls could talk: Places as stages for human drama. *Journal of Constructivist Psychology* **18** 203 – 214 cited in Sparkes, A.C. & Smith, B. (2008) Narrative Constructionist Inquiry. In *Handbook of Constructionist Research* J. A Holstein and J. F. Gubrium (eds.) New York / London: The Guilford Press
- Sartre, J-P. (1954) *Being and Nothingness* New York: Philosophical Library
- Sassatelli, R. (2014) *Fitness Culture. Gyms and the Commercialisation of Discipline and Fun*. (London: Palgrave Macmillan.
- Sawchuk, K. A.(1995) From Gloom to Boom: Age, Identity and Target-marketing. In M. Featherstone and A. Wernick (eds.) *Images of Aging: Cultural Representations of Later Life*. London: Routledge.
- Sayad, A. (2004) *The Suffering of the Immigrant*. Cambridge: Polity. Cited in Shilling, C. (2012) *The Body and Social Theory*. (third edition) London: Sage.
- Schaie, K. W. and Willis, S. L. (1996) *Adult Development and Aging* (2nd ed.) Boston: Little, Brown
- Schuler, P. B., Vinci, D., Isosaari, R. M., Philipp, S. F., Todorovich, J., Roy, J. L. P. and Evans, R. R. (2008) Body-shape perceptions and body mass index of older African-American and European American women. *Journal of cross-cultural Gerontology*. **23** (3) 255 - 64
- Schutz, A. (1964) *Collected Papers Vol.II Studies in Social Theory* The Hague: Martinus Nijhoff
- Schwandt, T. A. (2003) Three Epistemological Stances for Qualitative Inquiry: Interpretivism, Hermeneutics and Social Constructionism, in *The Landsape of Qualitative Research* Denzin, N. K. & Lincoln, Y. S. (eds.) London: Sage
- Seale, C. and Charteris-Black, J. (2008) The interaction of age and gender in illness narratives. *Ageing and Society* **28** (7) 1035 -1945
- Seeman, T., Unger, J. B., McAvay, G. & Medes de Leon, C. F. (1999) Self-efficacy beliefs and perceived declines in functional ability: the MacArthur studies of successful ageing. *Journal*

of Gerontology: Psychological Sciences **54** 214 – 22. Cited in Bowling, A., See-Tai, S., Ebrahim, S., Gabriel, z. & Solanki, P. (2005) Attributes of age-identity. *Ageing & Society*, **25** 479 -500

Segar, M. L. and Richardson, C. R. (2014) Prescribing pleasure and meaning: Cultivating walking, motivation and maintenance. *American Journal of Preventative Medicine* **47** (6) 838 - 41

Sen, A. (1999) *Development as Freedom* Oxord: Oxford University Press.

Sen, A. (2007) *Identity & Violence. The illusion of destiny*. London: Penguin Books

Sherman, E. & Schiffman, L. G. (1991) Quality of Life (QoL) assessment of older consumers: a retrospective review. *Journal of Business and Psychology* **6** 107 – 19. Cited in Bowling, A., See-Tai, S., Ebrahim, S., Gabriel, z. & Solanki, P. (2005) Attributes of age-identity. *Ageing & Society*, **25** 479 -500

Shilling, C. (1993) *The Body and Social Theory*. London: Sage.

Shilling, C. (2012) *The Body and Social Theory*. (third edition) London: Sage.

Shotter, J. (1993) *The Cultural Politics of Everyday Life* Buckingham: Open University Press

Siegrist, J. (1996) Adverse health effects of high effort/low reward conditions. *Journal of Occupational Health Psychology* **1**, 1 27-41 in McMunn, A., Nazroo, J., Wahrendorf, M., Breeze, E. and Zaninotto, P. (2009) *Ageing & Society* **29** 765 -782

Siegrist, J. and Marmot , 2004 Health inequalities and the psychosocial environment: two scientific challenges. *Social Science and Medicine* **58** 1463-73 In McMunn, A., Nazroo, J., Wahrendorf, M., Breeze, E. and Zaninotto, P. (2009) *Ageing & Society* **29** 765 -782

Silverman, D. (2000) *Doing Qualitative Research* London: Sage

Skelton, D., Young, A., Walker, A. & Hoinville,E. (1999) *Physical Activity in Later Life. Further analysis of the Allied Dunbar National Fitness Survey and Health Education Authority National Survey of Activity & Health*. Cambridge: The University Press

Skelton, D. (2011) *Physical Activity in the Prevention and Treatment of Disease* Available from www.laterlifetraining.co.uk/physical-activity- [Accessed 19/12/13]

Smith, B. (2000) Learning Experiences of Older Adults as University Students: Opportunities for Transformational Learning. In C. A. Weissner, S. R. Meyer and D. A Fuller (eds.) *The Third International Transformative Learning Conference: Challenges of Practice: Learning in Action*. New York: Columbia University. Cited in Baumgartner, L. M. (2001) An Update on Transformational Learning *New Directions for Adult and Continuing Education*. 89 15 -24

- Smith, B. and Sparkes, A. C. (2008a) Narrative Constructionist Inquiry. In J. J. Holstein and J. F. Gubrium (eds.) *Handbook of Constructionist Research* New York / London: Guilford Press
- Smith, B. and Sparkes, A. C. (2008b) Contrasting perspectives on narrating selves and identities: an invitation to dialogue *Qualitative Research* **8** (1) 5 - 35
- Smith, G. (2006) *Erving Goffman*. London: Routledge.
- Smith, J. (2000) The Fourth Age: A period of psychological mortality? *Max Planck Forum* 4 http://www.demogr.mpg.de/Papers/workshop/010730_paper01 accessed 4/1/2018
- Smith Maguire, J. (2008) *Fit for consumption. Sociology and the Business of Fitness*. Routledge: New York
- Solomon, R.C. (1988) *Continental Philosophy since 1750. The rise and fall of the self*. Oxford: Oxford University Press.
- Sontag, S. (1972) The Double Standard of Aging. *The Saturday Review* 29 - 38
- Sorabji, R. (2006) *Self. Ancient and Modern Insights about Individuality, Life and Death*. Oxford: Clarendon Press.
- Sparkes, A. (2002) *Telling tales in sport and physical activity. A qualitative journey*. Champaign,IL: Human Kinetics Press
- Sparkes, A. (2007) Embodiment, academics and the audit culture: a story seeking consideration. *Qualitative Research* **7** (4) 521 - 550
- Sparkes, A.C. (2010) Performing the ageing body and the importance of place. Some autoethnographic moments. In B.Humberstone, (Ed.) *Third Age Leisure Research: Principles and Practice*. LSA Publication No.108. Eastbourne: Leisure Studies Association.
- Sparkes, A. and Douglas, K. (2007) Making the case for poetic representations: An example in action. *The Sport Psychologist* **21** 170 - 189
- Sparkes, A.C. & Smith, B. (2008) Narrative Constructionist Inquiry. In *Handbook of Constructionist Research* J. A Holstein and J. F. Gubrium (eds.) New York / London: The Guilford Press
- Sparkes, A.C. & Smith, B. (2009) Judging the quality of qualitative inquiry: Criteriology and relativism in action. *Psychology of Sport and Exercise* **10** 491 - 497
- Sparkes, A.C. & Smith, B. (2014) *Qualitative Research Methods in Sport, Exercise and Health* Routledge: London

Specht, J. Luhmann, M. and Geiser, C. (2014) On the consistency of personality types across adulthood: latent profile analysis in two large-scale panel studies. *Journal of Personality and Social Psychology* 107 (3) 540 - 556

Spini, D., Jopp, D. S., Pin, S. & Sringhini, S. (2016) The Multiplicity of Aging: Lessons for Theory and Conceptual Development from Longitudinal Studies. In Bengtson, V. & Settersten, R. A. (eds.) (2016) *Handbook of Theories of Aging*. New York: Springer Publishing Company

Spirduso, W. W. (1994) Physical activity and aging: Retrospections and visions for the future. *Journal of Aging & Physical Activity* 2 233 -242

Socialist Worker (2012) Aleague of our own: the story of the workers' sports movement. *Socialist Worker* 2311 Tues. 10 July, 2012

Sport England (2006) *Active People Survey*. Available from www.sportengland.org/research [Accessed 4/4/14].

Sport England, (2006) *Understanding participation in sport: What determines sports participation among recently retired people*.

Sport England (2016) ch1 Towards an Active Nation available from <https://www.sportengland.org> [Accessed 14/4/17]

Stead, M., Wimbush, E., Eadie, D. & Teer, P. (1997) A qualitative study of older people's perceptions of ageing and exercise: the implications for health promotion. *Health Education Journal* 56, 3-16

Stevens, R. (1996) Introduction: making sense of the person in a social world. In Stevens, R. (ed.) (1996) *Understanding the self*. London: Sage

Stevens, R. (1996) The reflexive self: an experiential perspective. In Stevens, R. (ed.) (1996) *Understanding the self*. London: Sage

Stevens, R. and Wetherell, M. (1996) The self in the modern world. In Stevens, R. (ed.) (1996) *Understanding the self*. London: Sage

Stewart, A. L., King, A. C. & Haskell, W.L. (1993) Endurance Exercise and health-related quality of life in 50-65 year-old Adults. *The Gerontologist* 33 (6) 782-789

Stiglitz, J., Sen, A. and Fitoussi, J.P. (2009) *Report by the Commission of Economic Performance and Social Progress*. www.stiglitz-sen-fitoussi.fr accessed 27 Oct. 2016

Stillman, T. F. and Baumeister, R. F. (2009) Uncertainty, Belongingness, and Four Needs for Meaning. *Psychological Inquiry* 20 249 – 251

Stock, G. and Callahan, D. (2004) Debates: Point-counterpoint: Would doubling the human life span be a net positive or negative for us either as individuals or as a society. *Journals of Gerontology: Series A* **59** 6 B334 – B559

Szmigin, I. & Carrigan, M. (2001) Learning to love the older consumer. *Journal of Consumer Behaviour*. **1** 1, 22 - 34

Tajfel, H. (1969) Social and cultural factors in perception. In G. Lindzey & E. Aronson (eds.) *Handbook of social psychology* (Vol. 3 pp. 315 -94) Reading MA: Addison-Wesley. Cited in M. A.Hogg and G.M. Vaughan, *Social Psychology* (2005) (4th ed.) Harlow: Pearson Prentice Hall.

Tajfel, H. (1974) Social identity and intergroup behaviour. *Social Science Information*, **13** 65-93. Cited in M. A.Hogg and G.M. Vaughan, *Social Psychology* (2005) (4th ed.) Harlow: Pearson Prentice Hall.

Tamminen, K. A. and Bennett, E. V. (2017) No emotion is an island: An overview of theoretical perspectives and narrative research on emotions in sport and physical activity. *Qualitative Research in Sport, Exercise and Health* **9** (2) 183 – 199

Taylor, C. (1990) *Sources of the self*. Cambridge, Mass.: Harvard University Press. Cited in Elliott, A. (2014) *Concepts of the self*. Cambridge: Polity Press

Taylor, D. (2014) Physical activity is medicine for older adults *Postgraduate Medicine Journal* **90** 26 - 32

Taylor, A. H., Cable, N. T., Faulkner, G., Hillsdon, M., Narici, M. and Van der Bij, A. K. (2004) Physical activity and older adults: a review of health benefits and the effectiveness of interventions *Journal of Sports Science* **22** 703 - 725

Taylor-Pilae R. E., Newell, K. A., Cherin, R., Lee, M. J., King, A.c. and Haskell, W. I. (2010) Effects of tai chi and Western exercises on physical and cognitive functioning in healthy community dwelling older adults. *Journal of Aging and Physical Activity* **18** (3) 261 -79

Teuscher, U. (2010) Change and persistence of personal identities after the transition to retirement. *International Journal of Aging and Human Development* **70** (1) 89 - 106

Thompson, P. (1992) 'I don't feel old': subjective ageing and the search for meaning in later life. *Ageing & Society*, **12** 1, 23 – 47

Thorndike, E. L., Bregman, E. O. Tilton, W. J. and Woodyard, E. (1928) *Adult Learning* New York: Macmillan.

Throsby, K. (2013) "If I go in like a cranky sealion, I come out like a smiling dolphin": Marathon swimming and the unexpected pleasures of being a body in water. *Feminist Review* **103**, 5 - 22

- Tiggemann, M. (2004) Body image across the adult life span: Stability and change. *Body Image* **1** (1) 29 - 41
- Tiggemann, M. and Andrews, R. (2012) Clothes make a difference: The role of self-objectification. *Sex Roles* 66: 646 – 654
- Timonen, V. (2008) *Ageing Societies: A comparative introduction* London: Open University Press
- Toates, F. (1996) The embodied self: a biological perspective. In Stevens, R. (ed.) (1996) *Understanding the self*. London: Sage Publications.
- Townsend, J., Godfrey, M. & Denby, T. (2006) Heroines, villains and victims: older people's perceptions of others. *Ageing & Society*, **26** 883 – 900
- Townsend, N., Wickramasinghe, K., Williams, J., Bhatnagar, P. and Rayner, M. (2015) *Physical Activity Statistics, 2015* London: British Heart Foundation
- Tracy, J. L., Cheng J. T., Robins, R. W. and Trzeniewski, K. H. (2009) Authentic and hubristic pride: The affective core of self-esteem and narcissism. *Self and Identity* **8** 196 -213
- Troen, B. R. (2003) The Biology of Ageing. *Mount Sinai Journal of Medicine* **70** 3 – 22. Cited in Bowling, A., See-Tai, S., Ebrahim, S., Gabriel, z. & Solanki, P. (2005) Attributes of age-identity. *Ageing & Society*, **25** 479 -500
- Tulle, E. (2008a) Acting your age? Sports Science and the ageing body. *Journal of Aging Studies* **22** 340 – 347
- Tulle, E. (2008b) The ageing body and the ontology of ageing: athletic competence in later life. *Body and Society* **14** (3) 1 - 19
- Tulle, E. (2012) Snap happy: being old in Scotland in photographs. In *Representing Ageing: images and identities* Ylane, V. (ed.) pp.207 – 227 London: Palgrave Macmillan
- Tulle, E. and Dorrer, N. (2012) Back from the brink: ageing, exercise and health in a small gym. *Ageing and Society* 32 (7) 1106 - 1127
- Tulle, E. and Krekula, C. (2013) Ageing embodiment and the search for social change *International Journal of Ageing and Later Life* **8** (1) 7 - 10
- Tulle, E. (2015) Physical Activity and Sedentary Behaviour: A Vital Politics of Old Age? In E. Tulle & C. Phoenix (eds.) *Physical Activity and Sport in Later Life. Critical Perspectives*. Basingstoke: Palgrave Macmillan.
- Tulle, E. and Phoenix C. (2015) Introduction: Rethinking Physical Activity and Sport in Later Life. In *Physical Activity and Sport in Later Life: Critical Perspectives*. London: Palgrave Macmillan

- Turner, B. S. (1991) Recent Developments in the Theory of the Body. In Featherstone, M., Hepworth, M. & B. S. Turner (eds.) *The Body, Social Process and Cultural Theory*. London: Sage Publications.
- Turner, B. S. (1995) Ageing and Identity. Some reflections on the somatization of the self. In Featherstone, M. & Wernick, A. (eds.) *Images of Aging*. Pp. 245 -260 London: Routledge.
- Twigg, J. (2007) Clothing, age and the body: a critical review *Ageing and Society* **27** 285 -305
- Twigg, J. (2009) Clothing, identity and the embodiment of age. In J. Powell and T. Gilbert (eds.) *Ageing and Identity: A Postmodern Dialogue*. New York: Nova Science. Cited in Shilling, C. (2012) *The Body and Social Theory*. (third edition) London: Sage Publications.
- Vaillant, G. E. and Mukamal, K. (2001) Successful Aging. *American Journal of Psychiatry*, **158** 839 -47 Cited in Bowling, A., See-Tai, S., Ebrahim, S., Gabriel, z. & Solanki, P. (2005) Attributes of age-identity. *Ageing & Society*, **25** 479 -500
- Van Manen, M. (2007) *Researching Liver Experience. Human Science for an Action Sensitive Pedagogy*. Canada: The Althouse Press.
- Varma, V.R. I., Chuang, Y.F., Harris, G. C., Tan, E. J. and Carlson, M.C. (2015) Low-intensity daily walking activity is associated with hippocampal volume in older adults. *Hippocampus* **25** (5) 605 - 615
- Vaz, V. (2015) *Oral evidence: Impact of physical activity and diet on health HC845* House of Commons Health Committee 3 Feb.2015
- Victor, C. (2010) The Demography of Aging. In Dannefer, D. and Phillipson, C. (eds,) *The Sage Handbook of Social Gerontology*. London: Sage pp. 75 -95
- Vickerstaff, S. (2015) Retirement. Evolution, revolution or retrenchment. In J. Twigg and W. Martin (eds.) *Routledge Handbook of Cultural Gerontology* 297 - 304
- Vincent, J.A. (2006) Age Contested: Anti-ageing Science and the Cultural Construction of Old Age. *Sociology*, **40** (4), 681 -698
- Voeicker-Rehage, C. (2008) Motor-skill learning in older adults – a review of studies on age-related differences *European Review of Aging and Physical Activity* **5** 5-16
- Vygotsky, L. S. (1962) *Thought and Language*. Cambridge, MIT Press and Wiley. Cited in Stevens, R. (ed.) (1996) *Understanding the self*. London: Sage
- Wahl, H-W. & Oswald, F. (2016) Theories of Environmental Gerontology: Old and New Avenues for Person-Environmental Views of Aging. In Bengtson, V. & Settersten, R. A. (eds.) (2016) *Handbook of Theories of Aging*. New York: Springer Publishing Company.

Wainwright, S. P. and Turner, B. S. (2003) Aging and the Dancing Body. In C. A. Faircloth (ed.) *Aging Bodies: Images and Everyday Experience*. 259 – 292 Oxford: Altamira Press

Walker, A. (1999) Public Policy and Theories of Aging: Constructing and Reconstructing Old Age. In Bengtson, V. and Schaie, K. W. (1999) *Handbook of Theories of Aging*. New York: Springer Publishing Company.

Walker, A. (2002) A Strategy for Active Ageing. *International Social Security Review*. 55 **1** 121 -139

Walker, A. (2007) Editorial. *Age and Ageing* **36** 491 - 483

Walker, A. (2012) Speech to Age UK: *Agenda for Later Life* Conference, 8th March 2012: London

Warner, G., Doble, S. E. & Hutchinson, S.L. (2012) Successful aging in transition: contemplating new realities. *World Leisure Journal* **24** (3) 255-268

Wearing, B. (1995) Leisure and resistance in an ageing society. *Leisure Studies* **14** (4) 263 - 279

Weiss, D. and Lang, F. R. (2012) 'They' are old but 'I' feel younger: age group dissociation as a self-protective strategy in old age. *Psychology and Aging* **27** (1) 153 – 163

Wellard, I. (2012) Body-reflexive pleasures: exploring bodily experiences within the context of sport and physical activity. *Sport, Education and Society* **17** (1) 21 - 33

Wellard, I. (2014) *Sport, Fun and Enjoyment. An Embodied Approach* Abingdon: Routledge

Welsh, E. (2002) Dealing with Data: Using Nvivo in the Qualitative Data Analysis Process. *Forum: Qualitative Social Research* **3** 2 Art.26

Westerhof, G. and Tulle. E. (2007) Meanings of ageing and old age: discursive contexts, social attitudes and personal identities. In Bond, J., Peace, S., Dittman-Kohli, F. & Westerhof, G. (eds.) *Ageing in Society* (third edition) London: Sage

Wetherell, M. and Maybin, J. (1996) The distributed self: a social constructionist perspective. In Stevens, R. (ed.) (1996) *Understanding the self*. London: Sage

Wheeler, R.F. (1978) Organized Sport and Organized Labour: The Workers' Sports Movement. *Journal of Contemporary History* **13** (2) Special issue: Workers' Culture 191 - 210

White and Curtis (1990) English-French Canadian differences in types of sport participation: a test of the school socialization explanation *Sociology of Sport Journal* **7** 347 - 369

Wiggins, R. D., Higgs, P. F. D., Hyde, M. & Blane, D. B. (2004) Quality of life in the third age: key predictors of the CASP-19 measure. *Ageing & Society* **24** 693 -708

Willetts, D. (2010) *The Pinch*. London: Atlantic Books. In Phillipson, C. (2013) *Ageing*. Cambridge: Polity.

Williams and Wilkins (1995) *American College of Sports Medicine Guidelines for Exercise Testing and Prescription* 5th ed. Indianapolis: ACSM

Wilson, D. (2007) Aging: Disease or Business Opportunity? New York Times. Retrieved from <http://www.nytimes.com/2007/04/15/business/yourmoney/15aging.html?pagewanted=all>
Cited in Flatt, M. A., Settersten Jr., R. A., Ponsaran, R. & Fishman, J. R. Are 'Anti-aging medicine' and 'Successful Aging' Two Sides of the Same Coin? Views of Anti-Aging Practitioners. *The Journal of Gerontology Series B Psychological Sciences and Social Sciences* **68** (6) 944 -955

Wininger, S. R. and Pargman, D. (2003) Assessment of factors associated with exercise enjoyment *Journal of Music Therapy* **40** (1) 57 – 73

Wolcott, H. F. (2001) *Writing up Qualitative Research* 2nd ed. London: Sage

Wolcott, H. F. (2010) *Ethnography Lessons: A Primer* Abingdon: Routledge

Wolpert, L. (2016) *You're looking very well. The surprising nature of getting old*. London: Faber & Faber.

Woodward, K. (1991) *Aging and its discontents* Indiana: Indiana University Press

World Health Organisation (2002) *Active Ageing: A Policy Framework*. Geneva: WHO. Available from <http://www.euro.who.int> accessed 9 Mar. 2014

World Health Organisation (2012) Good health adds life to years available from http://www.who.int/world_health_day/2012 accessed 21/12/13

WHO. (2012). Global health risks. Mortality and burden of disease attributable to selected major risks. http://www.who.int/healthinfo/global_burden_disease/GlobalHealthRisks_report_full.pdf. Accessed 12 Jan. 2013.

World Health Organisation (2015) *World Report on Ageing and Health*. Geneva: WHO

Yang, X. (1997) A multidisciplinary analysis of physical activity, sport participation and dropping out among young Finns, a twelve year follow –up study. *Likes Research Reports on Sport and Health*, 103. In J. Curtis, W. McTeer, and P. White, (1999) Exploring Effects of School Sport Experiences on Sport Participation in Later Life. *Sociology of Sport Journal* 36 348 -365

Yin, R. (1994) *Case Study Research. Design and Methods*. London: Sage

Ylanne, V. (2015) Representations of ageing in the media. In J. Twigg and W. Martin (eds.) *Routledge Handbook of Cultural Gerontology* 369 - 376

Zuckin, S. & Maguire, J. S. (2004) Consumers and Consumption. *Annual Review of Sociology* **30** 1 173 – 97

Zurcher, L. (1977) *The Mutable Self* Beverly Hills,

Appendices

Appendix A

Participant Information sheet

Consent form

Record of participating exercise classes

Information sheet for participants: Ageing & Exercise.

The benefits of staying active as we age are well-known and have been demonstrated by much research. This study aims to paint a picture of how people *feel* about staying active; their experience; what they choose to do and whether their interests are appropriately catered for in society today.

You are invited to share your thoughts on these issues in a one-to-one interview lasting between 30 minutes and an hour/ reminiscence workshop lasting about an hour. It would be helpful for the research if you would agree to the interview being recorded. The text of the interview will then be transcribed and you will be asked to check it for any errors. You will also have the opportunity to add anything further or to amend anything that you no longer agree with.

You may not directly benefit from the research yourself but you may have the satisfaction that your thoughts and feelings may have beneficial implications for other people in the form of exercise provision.

If at any time you feel uncomfortable during the procedure you have the right to withdraw without prejudice and without providing a reason. Should you wish to withdraw it would be helpful if, at that point, you would give your permission for data already produced to be retained as part of the study.

After the interviews have been transcribed, checked and amended as necessary the text will be analysed for recurring themes with a view to producing theories about how to improve current exercise provision. The material will only be viewed by the researcher and her supervisors and will be stored on a password-protected computer. Otherwise complete confidentiality will be maintained.

It may be helpful to quote material from the text of interviews to support the production of theories. You will be able to decide whether you would like such quotations to be anonymised or whether you would like them to be acknowledged by your first name so that you can recognise them when the final report is published.

The inspiration for and interest in this study is close to my heart. I hope that the findings will make a worthwhile contribution to society and for this reason I am funding my own research for the award of Ph D from the University of Coventry.

If you have any questions or for further details of 'Ageing & Exercise' please contact: Sue Stuart, sue.stuart@bucks.ac.uk

Consent Form for Ageing and engagements with physical activity.

Please tick the appropriate boxes

I have read and understood the project information sheet.....
☐

I have been given the opportunity to ask questions about the project.....
☐

I agree to take part in the project. Taking part in the project will include either being interviewed or taking part in a reminiscence workshop

..... ☐

I understand that my taking part is voluntary; I can withdraw from the study at any time and I will not be asked questions about why I no longer want to take part..... ☐

Select only one of the next two options:

I would like my name used where I have said or written as part of this study where it will be used in reports, publications and other research outputs so that anything I have contributed to this project can be recognised.....
☐

I do not want my name used in this project..... ☐

I understand my personal details such as phone number or address will not be revealed to people outside of this project.....
☐

I understand that my words may be quoted in publications, reports, web pages, and other research outputs but my name will not be used unless I requested it above.....
☐

I understand that other researchers will have access to these data only if they agree to preserve the confidentiality of these data.....
☐

I understand that other researchers may use my words in publications, reports, web pages and other research outputs.....
☐

I agree to assign the copyright I hold in any materials related to this project to Sue Stuart..... ☐

On this basis I am happy to participate in the Ageing and engagements with physical activity study

Name of Participant Signature..... Date.....

Name of Researcher..... Signature..... Date.....

If you have any queries or concerns, please contact: Sue Stuart, sue.stuart@bucks.ac.uk,

Groups comprising the case study

4 X ETM (3 Adult Learning + 1 Community Centre run)

3 X Tai Chi (All Adult Learning)

2 X Pilates (All Adult Learning)

ETM Group 1

Meets 9.30 Monday morning in the youth club hall of a large village situated in a rural area where there are other smaller villages.

Membership: 10 -12 of which 4 have been members for over 15 years; 4 over 5 years and the rest floating.

I was their instructor from January, 2008 until summer 2014 and have continued to meet with them for focus groups.

ETM Group 2

Meets 9.15 Tuesday morning in the community centre of an affluent riverside village

Membership: 10 -15 of which 6 have been members for over 20 years and the rest tend to stay once they have joined. Those who leave usually do so as a result of illness or the need to care for another family member.

They had the same teacher for over 20 years until she retired in 2009 when I took over the group.

ETM Group 3

Meets 6.30 Thursday evening in the community centre of an established suburb of a large town.

Membership: 9 – 10 of which 5 are long term members, 4 of whom have been members from the start

The group started when the secretary of the community centre asked me to run a pilot scheme of 6 weeks in summer 2010 and has continued since then.

ETM Group 4

Meets 11.15 Friday morning in the memorial hall of an affluent small town in the London commuter belt.

Membership: 18 -24 of which 6 have been members for over 20 years.

When I took on this group in September 2006 there were 9 members – the minimum number for Adult Learning to allow the group to run. I have built up the membership during the 9 years I have been associated with the group. People tend to stay once they have joined and only leave because of illness or moving house. I have had to ask Adult Learning to raise the maximum number of participants from 18 to 24 to cater for the group's appeal. On occasion there has still been a waiting list to join.

ETM groups at a glance

Group	Meets		Membership	Period as the group's instructor
	Time	Place		
1	Mon. 9.30	Youth centre rural village	10 -12 of which 4 for over 15 years; 4 over 5 years and the rest floating.	From January, 2008 until summer 2014 (I have continued to meet with them for focus groups).
2	Tues. 9.15	Community centre, large, affluent riverside village	10 -15 of which 6 for over 20 years and the rest tend to stay once they have joined. Those who leave usually do so as a result of illness or the need to care for another family member.	They had the same teacher for over 20 years until she retired in summer 2008 when I took over the group.
3 (community run)	Thurs. 6.30	Community centre, suburb of large town	9 – 10 of which 5 are long term members, 4 have been members from the start	The group started when the secretary of the community centre asked me to run a pilot scheme of 6 weeks in summer 2010 and has continued since then.
4	Fri. 11.15	Memorial hall, small, affluent commuter town	18 -23 of which 6 have been members for over 20 years. Membership has increased from 9 (the minimum number for Adult Learning to allow the group to run) since I took over.	The first group I took on in September 2006 there were 9 members. I have built up the membership and have had to ask Adult Learning to raise the maximum number of participants from 18 to 24 to cater for the group's appeal. People tend to stay once they have joined and only leave because of illness or moving house. On occasion there has been a waiting list to join.

Tai chi groups

Group	Meets		Membership	Period as group's instructor
	Time	Place		
1	10.30 Tues	Community centre, large, affluent riverside village	Advanced level 12 -18 Current members started as beginners 5 years ago	From the beginning 2009 →
2	10.45 Weds.	Community centre, suburb of large town	Advanced level 9 -12 Current members started as beginners 5 years ago	From the beginning 2010 →
3	9.30 Fri.	Adult Learning Centre, affluent commuter town	Beginners max 14 group changes every two years Current group 8 (reduced number of sessions for small group)	From the beginning 2012-2015

Pilates groups

Group	Meets		Membership	Period as group's instructor
	Time	Place		
1	1.15 Mon	Adult Learning Centre, small town	10 -14 of which 6 have been members for over 5 years	2010 -2013
2	9.30 Weds	Community centre, suburb of large town	Max.12 (determined by size of room) New group 2010, some changes	Began with new group 2010

Appendix B: Adult Learning documents

Combined enrolment form and learning agreement	pages 271 – 274
Excerpt from Terms & Conditions 2016 – 17	page 275
Physical Activity readiness questionnaire + instructions	pages 276 – 277
Current individual Learning Plan 2016 – 17	page 278
Examples of former progress monitoring documents	page 279
Examples of quality assurance monitoring documents	pages 280 – 282

COMBINED ENROLMENT & LEARNING AGREEMENT FORM 2016 – 17



ADULT LEARNING
BUCKINGHAMSHIRE

Combined Learning & Enrolment Form

Surname		First Name		Title
Please circle Male / Female		Date of Birth DD/MM/YY	Age on 31/08/16	
Student Reference Number (if known)		National Insurance Number (Not needed for 'A' courses)		
Home Address				
Email Address			Postcode	
Telephone (Home)			Mobile	
Emergency Contact Name (Under 18 must give next of kin)			Relationship	
Emergency Contact Number				
Have you attended a class with us or any other provider within the last 3 years				Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you been an ordinary resident in the UK/EU/EEA for more than 3 years?				Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, has your spouse been living in the UK/EU/EEA for 3 years or more?				Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, where did you live? (Evidence of eligibility will be required)				
Buckinghamshire County Council has an Equal Opportunities Policy. We aim to ensure that unfair discrimination does not take place and all students are catered for equally. To help the Council monitor the effectiveness of the policy, please complete this questionnaire by ticking the appropriate box.				
<input type="checkbox"/> White – British	<input type="checkbox"/> Mixed – Any other mixed background	<input type="checkbox"/> Black or Black British – African		
<input type="checkbox"/> White – Irish	<input type="checkbox"/> Asian or Asian British – Indian	<input type="checkbox"/> Black or Black British – Caribbean		
<input type="checkbox"/> White – Any other white background	<input type="checkbox"/> Asian or Asian British – Pakistani	<input type="checkbox"/> Black or Black British – Any other Black background		
<input type="checkbox"/> Mixed – White and Black Caribbean	<input type="checkbox"/> Asian or Asian British – Bangladeshi	<input type="checkbox"/> Gypsy or Irish traveller		
<input type="checkbox"/> Mixed – White and Black African	<input type="checkbox"/> Asian or Asian British – Chinese	<input type="checkbox"/> Arab		
<input type="checkbox"/> Mixed – White and Asian	<input type="checkbox"/> Asian or Asian British – Any other Asian background	<input type="checkbox"/> Any other ethnic group		

www.adultlearningbcc.ac.uk

25

We want you to get the best from your course, so it is important that we know about your support needs

If you have a disability or learning difficulty, please tick yes ☐. If you have answered yes, please tick all boxes that apply to you:

<input type="checkbox"/> Hearing impairment	<input type="checkbox"/> Autism Spectrum Disorder
<input type="checkbox"/> Do you need a hearing loop?	<input type="checkbox"/> Social and emotional difficulties
<input type="checkbox"/> Visual impairment	<input type="checkbox"/> Asperger's syndrome
<input type="checkbox"/> Dyslexia	<input type="checkbox"/> Profound complex disabilities
<input type="checkbox"/> Dyscalculia	<input type="checkbox"/> Other physical disability
<input type="checkbox"/> Mental health difficulties	<input type="checkbox"/> Other disability
<input type="checkbox"/> Temporary disability after illness or accident	<input type="checkbox"/> Other medical condition
<input type="checkbox"/> Disability affecting mobility <input type="checkbox"/> Do you need a ground floor room? <input type="checkbox"/> Do you need an accessible parking space? (available to Blue Badge holders only) <input type="checkbox"/> Please tick if you use a wheelchair	Learning difficulties: <input type="checkbox"/> Speech, language and communication needs <input type="checkbox"/> Moderate learning difficulties <input type="checkbox"/> Severe learning difficulties <input type="checkbox"/> Other (please specify) _____
<input type="checkbox"/> Prefer not to say	
Please state your primary disability or learning difficulty: _____	
<input type="checkbox"/> I would like to be contacted by the Learning Support team (if you have not already discussed your support needs)?	

Please enrol me on the following courses:				OFFICE USE ONLY		
Course Code	Course Title	Fee	I have enrolled on the same subject before*	Start Date	End Date	Aim Change
—	Registration fee 2016 – 17 academic year (first enrolment only)	£10	<input type="checkbox"/>	—		
			<input type="checkbox"/>			
			<input type="checkbox"/>			
			<input type="checkbox"/>			
			<input type="checkbox"/>			

*If so, please give details of the qualification(s), level and units or credits passed: _____

Please state your GCSE grades	GCSE English	GCSE Maths
GCSE grades		

To be completed by all learners. Please indicate the highest previous qualification you have achieved – please tick

<input type="checkbox"/> No Qualifications	<input type="checkbox"/> Level 5 (Foundation degrees)
<input type="checkbox"/> Entry Level	<input type="checkbox"/> Level 6 (Bachelor's degrees)
<input type="checkbox"/> Level 1 (GCSE grades D – G)	<input type="checkbox"/> Level 7+ (Masters degrees, Postgraduate certificates/diplomas)
<input type="checkbox"/> Full Level 2 (5 GCSE grades A* – C or O Levels)	
<input type="checkbox"/> Full Level 3 (2 A/4 AS Levels or National Diplomas)	<input type="checkbox"/> Other (Level not known)
<input type="checkbox"/> Level 4 (Certificates of Higher Education)	Are you already in full-time education? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employment details

<p>Employment status:</p> <p><input type="checkbox"/> In paid employment</p> <p><input type="checkbox"/> Not in paid employment, looking and available to start work</p> <p><input type="checkbox"/> Not in paid employment, not looking and/or not available to start work</p>	<p>If you are in paid employment:</p> <p>Are you employed full-time? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you self employed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
If you are currently employed, please provide the date on which your employment started DD/MM/YY	
If you are currently employed, how many hours per week do you work?	
If you are unemployed, how long have you been unemployed? Years: _____ Months: _____	

Household situation

<input type="checkbox"/> No household member employed, one or more dependent child	<input type="checkbox"/> No household member employed, no dependent child	<input type="checkbox"/> Household includes only one adult, one or more dependent child
<input type="checkbox"/> None of these statements apply		

How did you hear about Buckinghamshire Adult Learning? – please tick all that apply

<input type="checkbox"/> Brochure	<input type="checkbox"/> Poster/Flyer	<input type="checkbox"/> Website
<input type="checkbox"/> Outdoor Poster	<input type="checkbox"/> Radio	<input type="checkbox"/> Newspaper/Magazine
<input type="checkbox"/> Current/Past Learner	<input type="checkbox"/> Friend/Family	<input type="checkbox"/> Social Media
<input type="checkbox"/> Job Centre	<input type="checkbox"/> School/Children's Centre	<input type="checkbox"/> Workplace

PLEASE TURN OVER TO COMPLETE PERSONAL INFORMATION AND PAYMENT DETAILS

Funded by



Skills Funding Agency

www.adultlearningbcc.ac.uk

27

Please tick any that apply

<input type="checkbox"/> I receive Jobseekers Allowance Tick if you have been mandated to attend <input type="checkbox"/>	<input type="checkbox"/> I receive Employment and Support Allowance (WRAG). Tick if you have been mandated to attend <input type="checkbox"/>
<input type="checkbox"/> I receive Universal Credit and currently earn less than 16 times the National Minimum wage or £330 a month and I am determined by JobCentre Plus (JCP) as being in the receipt of one of the following: All Work-Related Requirements Group, Work Preparation Group, Work-Focussed Interview Group	<input type="checkbox"/> I am over 16 years and under 19 years on 31/08/16
<input type="checkbox"/> I am aged 19 – 23 on the date the course begins and I am not qualified to full Level 2*** e.g. minimum of 5 GCSEs at A* – C or NVQ 2	<input type="checkbox"/> I am aged 19 – 23 on the date the course begins and I am not qualified to full Level 3*** e.g. minimum 2 A levels or NVQ 3
<input type="checkbox"/> I currently earn less than 16 times the National Minimum wage or £330 a month and require these qualifications to become fully employed. I am receiving Housing Benefit, Council Tax Benefit (not single occupancy) or Income Support (please indicate)*	<input type="checkbox"/> I am 24 or over and will be applying for a loan from the Students Loan Company

Household earned income is less than £20,000 and I / my partner receive:

<input type="checkbox"/> Universal Credit*	<input type="checkbox"/> Working Tax Credit*
<input type="checkbox"/> Income Support*	<input type="checkbox"/> Pension Credit (Guaranteed credit only)*
<input type="checkbox"/> Employment Support Allowance (contribution based)*	<input type="checkbox"/> Disability Living Allowance*
<input type="checkbox"/> Housing Benefit or Council Tax Benefit (not single occupancy)*	<input type="checkbox"/> Personal Independence Payment*

* Please complete a Discretionary Learner Support Fund form *** Certain qualifications only. Please phone us for advice.

How we use your personal information

The personal information you provide is passed to the Chief Executive of Skills Funding ("the Agency") and, when needed, the Department for Education, including the Education Funding Agency and the European Social Fund (ESF) to meet legal responsibilities under the Apprenticeships, Skills, Children and Learning Act 2009, and for the Agency's Learning Records Service (LRS) to create and maintain a unique learner number (ULN). The information you provide may be shared with other partner organisations for education, training and employment – related purposes, including for research. Further information about use of and access to your personal data, and details of partner organisations are available at www.gov.uk/government/organisations/skills-funding-agency

Please tick the appropriate box(es) if you DO wish to be contacted:

About other courses, brochures or newsletters ☐ For surveys and research ☐

The Skills Funding Agency and OFSTED both run learner surveys and we are required to invite you to take part in these.

In addition, we are expected to provide details about the effectiveness of the training we provide, which may require us to contact you after your course has finished to find out how your course has helped you. These surveys and follow-up enquiries may be carried out by a third party.

Please tick the appropriate box(es) if you would prefer NOT to be contacted: By email ☐ By post ☐ By telephone ☐

Declaration and learning agreement

I certify that all the information is true and accurate to the best of my knowledge. Unless otherwise stated, I have been a resident of the UK/EU/EEA for a minimum of 3 years. I have received sufficient information on the choice of course(s) and am satisfied that the course(s) listed above meet(s) my requirements. I understand that I am also signing up to the future progression of this learning programme, or subsequent transfers, as deemed academically appropriate to achieve my learning goals. These changes will constitute part of this learning agreement. I agree to adhere to the expectations of Buckinghamshire Adult Learning as described in the learner charter.

Learner Signature	Date
Signed on behalf of Buckinghamshire Adult Learning	Date

Payment details

☐ Cash ☐ Cheque ☐ Credit Card ☐ Debit Card ☐ Direct Debit (Termly) ☐ Direct Debit (Monthly)

Card Number	Amount £
Name on Card	Security number on back of card
Issue Number	Valid From
	Expiry Date

I enclose a cheque/postal order for £ made payable to Buckinghamshire County Council

Direct debit is available for courses over £120 (25% deposit followed by 3 consecutive monthly payments) or termly over 25 weeks (34% deposit followed by 2 payments). First deposit due with this form.

RETURN: Adult Learning Enrolment Team, Buckinghamshire Adult Learning, Gallery Suite, Walton Street, Aylesbury, HP20 1UU

12. It may occasionally be necessary, for reasons beyond the control of Buckinghamshire Adult Learning, to change the course tutor; make slight changes to the timing or content of the programme, or move the course to an alternative venue within a reasonable distance of the advertised venue. Refunds will only be given in exceptional circumstances. Please be aware we are unable to confirm tutor details.

13. Where a session is cancelled, for reasons beyond the control of Buckinghamshire Adult Learning, for example, if a staff member is unwell or extreme weather conditions, we will try to offer an additional class at another time. We will promptly contact you if this happens. If the majority of the students are able to attend the alternative session then no refund will be given for the missed session.

14. The minimum number of students for most of our courses is nine. If a class does not reach its minimum number, we may close the course or offer you the opportunity to reduce the number of weeks with no corresponding reduction in fee, or we may increase the fee to the small group rate of £7.60 per hour as an alternative to closing the class.

Course Fees

15. Some courses may involve additional costs for materials. These will be outlined on the course information sheet you receive on enrolment. Unless specifically stated, you are advised not to buy equipment, materials or books prior to the first session.

16. Please note, an annual £10 registration fee applies upon enrolment.

Data

17. The personal information you provide is passed to the Chief Executive of Skills Funding ("the Agency") and, when needed, the Department for Education, including the Education Funding Agency and the European Social Fund (ESF) to meet legal responsibilities under the Apprenticeships, Skills, Children and Learning Act 2009, and for the Agency's Learning Records Service (LRS) to create and maintain a unique learner number (ULN). The information you provide may be shared with other partner organisations for education, training and employment-related purposes, including for research. Further information about use of and access to your personal data, and details of partner organisations are available at www.gov.uk/government/organisations/skills-funding-agency

The Skills Funding Agency and OFSTED both run learner surveys and we are required to invite you to take part in these. In addition, we are expected to provide details about the effectiveness of the training we provide, which may require us to contact you after your course has finished to find out how your course has helped you. These surveys and follow-up enquiries may be carried out by a third party.

18. All new learners will be allocated a Unique Learner Number (ULN). This ULN is the education equivalent of a National Insurance Number and is used for life. ULNs are issued to most learners from age 14 and they are used in schools, further and higher education, and particularly when entering exams or accessing the National Careers Service.

Attendance

19. If you do not hear from us to the contrary, please assume that your course will be running.

20. Under the terms of our student charter, all learners are required to be punctual for their class and to attend regularly. If you are unable to attend a session, please let us know.

General

21. All learners are required to sign a learning agreement at the beginning of their course and complete an Individual Learning Plan (ILP) for each course as a record of their learning and progress. **Learners who do not wish to do this will be charged £10 per hour.**

22. All learners are required to show respect for staff and other learners and to behave responsibly and safely at all times.

23. We are unable to accept responsibility for any damage to or loss of student property (including motor vehicles) or work.

24. Learners must be aged 18 or over at the start of their learning for all non-accredited courses.

All information correct as at June 2016

Buckinghamshire Adult Learning Pre-Exercise Questionnaire 2013/2014

**STRICTLY
CONFIDENTIAL**

*This form **MUST** be completed by learners attending physical activity classes,
before participating in the first session*

Name: Date of Birth:

Course Title & Code:

Your Personal Learning Goal

By undertaking these exercise sessions what would you specifically like to achieve by the end of this course e.g. reduce stiffness in my joints

.....
.....

If you are planning to take part in physical activity or an exercise class, start by answering the questions below. If you are between the ages of 15 and 69 the questionnaire will tell you if you should check with your doctor before you start. If you are over 69 years of age, and you are not used to being very active, we may request additional information and advice from your doctor.

ALL INFORMATION WILL BE TREATED CONFIDENTIALLY

- | | Please circle | |
|---|---------------|----|
| 1. Do you have, or have you ever had, any heart problems? | YES | NO |
| 2. Does your family have a history of heart disease? | YES | NO |
| 3. Do you have any back or joint problems? | YES | NO |
| 4. Do you ever feel faint or have spells of dizziness? | YES | NO |
| 5. Do you suffer from diabetes? | YES | NO |
| 6. Do you suffer from epilepsy? | YES | NO |
| 7. Do you have high blood pressure? | YES | NO |
| 8. Do you have low blood pressure? | YES | NO |
| 9. Are you currently taking any medication? | YES | NO |
| Have you been told how this medication may affect you during exercise? | YES | NO |
| 10. Have you had any illnesses or operations in the last year? | YES | NO |
| 11. Are you pregnant or have you had a baby in the last 6 months? | YES | NO |
| If you have answered "YES" to any of the above or you have any further information, which may affect your participation in an exercise class, please give details below. | | |

IF YOU HAVE ANSWERED YES TO ONE OR MORE QUESTIONS

Talk to your doctor by phone or in person before you start becoming more physically active. Discuss the kinds of activity you wish to participate in and follow his/her advice. Please initial here to indicate that you have received permission to attend this course _____

Student Informed Consent

I understand that I am responsible for monitoring my own responses during exercise and will inform the tutor and Adult Learning staff of any changes in my health or if any of the details above change.

*Please complete this form and
hand to your tutor at the first
session of your course.*

Signed:Date

Buckinghamshire Adult Learning

Procedure for Health Status Questionnaires 2013 - 2014

- All learners must complete a questionnaire when they start the course.
- Use the **Health Status Questionnaire Tracking Sheet** to ensure that all of your learners return their forms
- Please ask them to sign and date the **tracking sheet** when they return the form **TERMLY**.
- If they have answered **YES** to anything, please follow it up and, if you are in doubt about whether the student should enrol, ask for a letter from the doctor, stating that the student is fit to participate.
- **If you have advised the learner to seek medical advice or approval, make a note of this at the bottom of their Health Status Questionnaire and add your signature.**
- **Personal Learning Goal**
The personal learning goal (PLG) that has been recorded at the top of the pre exercise questionnaire at the start of the course by each learner should be recorded
 - on your Q3 - session plan to demonstrate how you cater for PLGs when planning for each session (these may change as the learner may change their PLG at the start of each term.
 - On your Q5 for you to monitor each learners progress towards achieving their PLG.
- **Modifications Grid** Use this grid to record any modifications/advice suggested for any of the activities in your sessions. *(You do NOT need to put the name of the learner on your session plan – just a note of the ailment and the appropriate modification will do – eg knee problem – omit squats)*
- **Sessional Verbal Check on Health Status** Ensure that you ask learners at the start of **each session** to let you know if anything has changed with regard to their health status.
- Please ensure that you pass the Health Status Questionnaire back to your learners at the start of each term for them to confirm the currency of their health status information. If there are changes, please record details in the appropriate column on the tracking sheet.
- **Place the tracking sheet and all questionnaires in your Course File**
- Please **DO NOT** leave the completed questionnaires in your register, otherwise you cannot guarantee that they will be kept **confidential**
- Reassure all students that you will keep the questionnaires secure and confidential and that the information on them will only be used by you to help with your session planning and that it is for their own benefit.
- Contact your Tutor Coordinator (TC) if there are any problems
- You do not need to get learners who **re-enrol** on Term 2 and 3 to complete a new questionnaire. It is sufficient to ask them to initial the **Tracking Sheet** to confirm that nothing has changed
- **New learners in Term 2 or 3** should follow the same procedure as those in Term 1 and they **must** initial and date the appropriate column on the **existing** tracking sheet.

On behalf of all the Fitness, Health & Leisure team

Individual Learning Plan (ILP) 2016-17

Name Joanna Course Code course title

Your goals

What do you want to get out of this course?

Pick out your personal goals from the course information sheet (CIS) and list them below.

Please add any other reasons why you have enrolled that may not be on the CIS:

Term 1 To stay fit

Term 2 To stay fit

Term 3

End of term / course reflection

Look back at your personal goals above.

What do you feel you have gained from this course?

Term 1 Stay fit

Term 2

Term 3

Tutor comment on your progress:

Term 1 Good progress

Term 2

Term 3

One thing you could work on next:

Term 1

Term 2

Term 3

Learning for Personal Development (ILP)

LO 1

PLG 1

LO 2

PLG2

LO3

LO 6

LO4

LO5

Individual Learning Programme (ILP) 2014-15 Term 1 / 2 / 3. Name..... Course Code.....

These are the course learning outcomes for this term (or course if this is a one day course). Enter one or two personal learning goals in the boxes provided. For each learning outcome and PLG, mark your starting point with a date and cross on the axis and then add dated crosses at the middle & end of the course as you make progress towards achievement in the centre of the circle.

PTO FOR END OF COURSE PROGRESS REVIEW.

Fill in the GAPs

Please **Circle** the following according to how you feel at the time
G – Good A – Average P – Poor

Action	Wk 1			Wk 10			Wk 20			Wk 30		
Overall Physical Fitness	G	A	P	G	A	P	G	A	P	G	A	P
Overall suppleness	G	A	P	G	A	P	G	A	P	G	A	P
Balance	G	A	P	G	A	P	G	A	P	G	A	P
Posture	G	A	P	G	A	P	G	A	P	G	A	P
Ability to relax	G	A	P	G	A	P	G	A	P	G	A	P
Ability to breathe correctly	G	A	P	G	A	P	G	A	P	G	A	P
Ability to concentrate	G	A	P	G	A	P	G	A	P	G	A	P
Overall confidence	G	A	P	G	A	P	G	A	P	G	A	P

Page 2

Fold here

Page 3



Q6 – On Course Evaluation Form

Tutor's Name **Course title**

Course Code

How do you feel about the following? Please tick as appropriate.

1	Is the course meeting your expectations?	Yes	Mostly	No	
2	Is the course content:	Just right	Too easy	Too difficult	
3	Is the pace of the course:	Just right	Too slow	Too fast	
4	Are the teaching and learning methods:	Very good	Good	Poor	
5	Do I give adequate feedback on your work?	Yes	Most of the time	No	
6	Do you know if you are making progress?	Yes		No	
7	What do you like the most about the course?				
8	Do you have any suggestions as to how the course could be improved?				
9	Has this course been of benefit to your physical and mental well being?	Yes		No	
	If YES to 9 – Please give brief details:				
10	Are you satisfied with any equipment you may have used?	Yes	No **	Not applicable	
11	I am enjoying the course:	Very much	Mostly	Not much	Not at all

** If you are not satisfied with the equipment, please give details and add any further general comments you may have about the course

.....

.....

Name (optional) **Date**



End of Course Survey 2012 – 2013

Dear Learner

We hope you have enjoyed your course with Buckinghamshire Adult Learning. Please take a few minutes to complete this survey as the information provided helps with future planning and improvements to our service.

Course Code: R1SF36AAO Course Title: Exercise – Gentle 50+

Venue: Haddenham Youth Centre

Please place a tick in all the boxes that apply to you.

Q1. This course has helped me:	Yes	No	Not applicable
a) Improve my self confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Keep my brain active	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Learn a new skill	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Improve skills for employment or volunteering purposes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) Meet new people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Adjust to a change in life circumstances (retirement, redundancy, bereavement, etc)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Maintain/improve my physical or mental health or general well being	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Support my children	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) Other (please state)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q2. What did you like best about you course? (Please write clearly in capitals)

*Yes. Meeting new people who are friendly
with laughter + smile*

Q3. What improvements could we make which would help us provide the best possible service to our learners?

Any other comments/compliments?

If you wish to be contacted please add your details:

Name:

Address:

E-mail address:

Telephone Number:

For office use only:

Form seen by TC:

Form seen by Ops:

Action taken (if any and by whom)

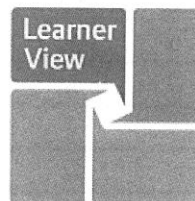
FREEPOST, RRKT-ALAX-EBAY
The Gallery Suite
County Hall
Aylesbury
HP20 1UZ

Thank you for completing this survey. Your views are very important to us.

Ofsted would like to know what you think of us, too!

Please visit www.adultlearningbcc.ac.uk and you will find a link in the 'News' section to their Learner View Survey.

Ofsted will use your feedback to help them decide when to inspect us and to also help them judge the effectiveness of our service when they visit.



Appendix C

Interview guide

Example of a contact summary sheet

Examples of notes and reflections taken from the field journal

- Vox pops
- An amusing incident
- Reflections on reactions to and discussions about AL's introduction of a Learning Agreement

Questions for interview/ topics

Meanings/ identity

What does exercise mean to you?

What do you think of others who exercise?

How do others see you?

Who do you exercise with? Who exercises with you?

What matters?

Experience / present and past behaviour

What activities do you like to do? Alone? With others? Why? How does it make you feel?

How often?

Activities you used to do? Why you gave them up. Changes?

Activities tried – disliked?

School days?

This class / venue / peer support

Reasons for coming / staying. How long?

Feelings afterwards / beforehand? / if you miss a week? / holidays

What would stop you?

Place in your life?

Ageing Well (conference) Beliefs / attitudes

What do you think it's about?

Meaning? How do you do it?

Changes over life course

19/10/15

Contact summary sheet B E 28/8/14 S D B P
M D J

Sch. exp^{ce} of PA. Lifecourse exp^{ce}

Reasons for start^{ing} ex. - physical ^{benefits} effects ^{aspiration}
P.A. integrated into life. ^{support for husband BUT}
^{unacceptable activity -}
^{run^{ing} machine - knees!}

Contacts in new area.

Influence of life course ^{transport} ecology / changes on P.A. exp^{ce}
- walk ^{everywhere} distance less w. age? ^{activities change} w. age.
Keep fit = gendered. ^{benefits} for leisure? ^{discomfort? embarrassment?}

Company - better to do things tog. - difficult to make yourself do it alone.
- pressing on to keep class going

Effect on muscles + on ability to do other functional activities - gain?

Widowhood → join Keep fit as a late starter

Effect of age on distance walked for pleasure. Earlier PA exp^{ce}
Green Goddess dislikes.

awareness of
what is
available
lack of
entail
provision?

Desire to do more org^{anized} ex. - interest in pilates
- enthusiasm to search for info.
Ballroom dancing - fashionable in youth - way of meeting people - akin to
search to be sociable. Time's coming to keep fit ^{rehabilitation}
- Getting over shyness. Power of ex. in recovery - medical approach
Coping w. being alone - requires determination
^{resilience}

2/7 Liked sch sports. Don't liked anything wh involved more

↳ meanings - physical barriers - strength in hands to
climb ropes

Follow up 16/10/14

T.
D.
J.

What happened when Joanne gave up. Some went to 'a young girl' +
n. many stuck w. it. Class folded. (D.)

T. - only think about age? when have aches + pains. Mentally don't
think about it - except memory - J. - everybody forgets what they go upstairs for

Effect of PA exp^{ce} on body - recuperate quickly

Sense of achievement. See? others. Instructor makes us feel good
D.S. n. same.

S.F. reluctant to come out but always feel gd afterwards.

Likes to be told she's doing it right

Evidence in life of those who've ex^{ercised} all their lives + remained fit -
but also the cruelty of genes - some unlucky + look much older
97 + 100

(9)

Vox Pops at S pilates

WHY did you choose pil. rather than any other form of ex.?

Mainly came on recommendation - of others

(5 respondents)

S, N, J, A, K

- medical/physical
- might be gd for specific cond.

Two (P&C) been coming longest - now part of ex. post retirement portfolio

They go to gym wh. they like less 'i' instructor has decided to do ZUMBA - difficult to follow routines 'i' n. enough repetition + too quick to follow. Need to go several x before you feel you're getting anywhere. What repetition there is is over before you have chance to do action properly

+ ETM

J likes her Zumba class 'i' she likes the active dancing around - but class has folded 'i' insufficient numbers. J (friend) had heard of S pilates + wanted to try it so they agreed to come tog. - like friendly atmosphere.

A comes 'i' she likes challenging ex. but doesn't like getting hot + sweaty.

W.P.
29/8/15

13/11/13

D. Pilates

V. serious group tho friendly

Took bag of small balls to do muscle release -
contained Comic Relief laughing ball.

- Christina's reaction 'But we're all adults
^{lower the tone}
here.' Nevertheless threw the ball at s.o. else

General laughter.

I explained why I came to have it & its
effect on the skittles players.

One latecomer - promised to explain late
K.

When using small balls A. said she
couldn't feel it - suggested she tried laugh^y
ball & threw it at her. She wasn't

NP
29/10/15 expect^y it & was startled into laughter.
Threw it at K. - amused.

25/4/13

Concern re new Ad Learn¹ Agreement

More bureaucracy diverting time from the 'learning'.
(Job creation)
Generic agreement "largely inappropriate in clauses."

Advantage is a 'bur'

Seems particularly surplus to requirements 'these
Philosophical 'learners' are CLIENTS who have paid for their 'learning'
starting point + are scarcely likely to waste their money by not attending.

BESIDES if they DO decide not to come it is their
own money they are wasting; there is no further cost to
AL. Anyone who withdraws is send^g a louder message
to AL than all the monitor^g documents wh. irritate people

What happened to RESPECT for 'Customers'

TRUST in the product. ?

ONTOLOGICAL
probs.

Paperwork destabilises
devalues AL for courses where inappropriate

Weber
Consumerism
Rationalisation

The people in 50+ ex. classes do not receive a subsidy.
Their classes are tangentially touched by Learning Skills money
"way administered. AL is the agency that books the
venues, employs the tutors + publishes the brochure +
website with the information.

Baroness Blatch - we can't tell LA's how to spend
their money + they need to address local needs.

Intention to gradually withdraw LS money. Future of
recreational classes? Already massively reduced in
number + take-up → vicious circle.

Appendix D

Analysis of the preliminary questionnaire

Poster: Ageing & Exercise, presented at the British Gerontological Society Conference,
Stirling University, July, 2016

Six questions about exercise backgrounds and experience

	1: attendance duration	2: reason for joining	3: description of class	4: other P A	5: Past P A	6: Changes	No. of returns	BAL end of course survey: 'What did you like best?'
ha	From 3 years to 'since 1987'	4x always been to keep fit 2x improve fitness 2x meet people	5x (v.)friendly 1x content 3x suitability of ex.	5x walk 3x gardening 2x tennis 2x dance 2x swim 1x golf 1x ski 1x pilates 1x housework	4x keep fit 4x walk 3x swim 2x line dancing 2x ski 3x tennis 1x pilates 1x sport at sch. 1x aquarobics 1x golf 1x lacrosse	1x it hasn't 5x not much change – just a bit less vigorous	6	Friendlyx2 Companyx2 Moving to music x2 Exercise x3 Improvement in physical health x1
y Fit	From 2 yrs to 20 yrs	3x need ex. 2x others' suggestion 1x keep fit 1x "" p. retire	3x fun 3x good ex. 2x friendly 1x good rapport with teacher 1x relaxing	5x walk 5x gardening 1x cycle 1x swim 1x housework	2x swim 2x netball 1 hockey 1 badminton 1 table tennis 1 yoga 1 ice skating 1 tennis 1 sport every day as child	3x slowed down 2x no change 1 more walking today	6	5 meeting people 5 good exercise 2 teacher
..	4 years x3 3 years x4 2.5 years x3	Curiosity re TC x4 Thought it might help x4 Suitable ex. X4 Recommended x2	Friendly x7 Beneficial x4 Informative x3 Brain challenge x2 Non-competitive x1 Enthusiastic x1 Dedicated x1 Fun x1 Exc. Tuition x1	Walk x7 Everyday activities x3 Gardening x2 Bowls x1 Carer for husband x1 Gym x1 Stretching x1	Swim x4 Tennis x 3 Walk x3 Keep fit x5 Yoga x4 Pilates x4 Running x2 Aquarobics x1 Fencing x1 Riding x1 Scottish dancing x1 Gym x1 Squash x1	Need less vigorous activity x10 Specific probs cited x5	10	13 returns 7x friendly/ company 4x suitable ex. 4x concentration 3x balance 3x teacher/ tuition 2x relaxation 2x gentle ex. 2x everything 1x soothing music 1x coordination
y	3 years (since the class started)	Help with pain x3 Improve muscle tone & posture x1 Improve flexibility x1 Always wanted to try pilatesx1 Dr.'s recommendation x1 Support for friend x1	Beneficial/suitable to requirementsx5 Non-competitive/ tailored to personal needs/ supportive x4 Friendly x3	Walk x3 Line dance x2 Swim x1 Aquarobics x1 Run x1	Aerobics x4 Swim x2 Yoga x2 Dance x2 Walk x1 Kung fu x1 School sports x1 Squash x1 Boxercise x1 Alexander technique x1	More conscious of risk of injury Time constrained/facilitated Ex. Choice unchanged x2 Prefer quieter class – no loud music	5	No evidence
y T.	3 – 6 years (start of class)	Health/mobility x4 Interest x4	Friendly x5 Fun x4 Exc. Tuition x3 Calming/relaxing Supportive/ beneficial Challenging / gd for brain/ memory Builds confidence Improves balance Very good	Walk x5 Gardening x3 Golf x2 None x2 Keep fit Bowls Pilates Housework	Swim x5 Pilates x2 Yoga x2 Aquarobics x2 Tap dance x2 Tennis Badminton Walk Keep fit cycling Squash	Slowed down x6 Less time x1 No change x1	8	No evidence
Fit	1 – 20 years	To keep fit x9	Friendly/sociable/ v. Pleasant x8	Walk x 9 Gardening x3	Walk x6 Swim x6	Little change/ age or	13	Friendly people Good teacher

G X Get Fit	1 – 20 years	To keep fit x9 Just retired x2 Came with friend x1 Recommended by friend x1	Friendly/sociable/ v. Pleasant x8 Fun x 5 Suitable for me/ work at own pace x 5 Good for the mind/ varied x4 Relaxed atmosphere x3 Ex. Content mentioned x3 Best teacher x2 Health info. X1 Music good Balanced Look forward to it every week Energetic Well run	Walk x 9 Gardening x3 Housework x3 Swim x3 pilates x3 tai chi x2 looking after grandchildren x2 aerobics Nordic walk Jogging Yoga Line dancing	Walk x6 Swim x6 Aerobics Jog Pilates x2 Yoga x3 Rosemary Conley x2 Tai chi x2 tennis x2 Golf x2 Gym Fell walking Housework gardening	Little change/ age or Health related change x8 No change x2 Now more aerobic based Can no longer play at competition standard and so don't want to play 'pat ball' Related to being in the open air and socialising Like moving to music without too much discipline & pressure	13	Friendly people Good teacher Not as fast as Zumba and the teacher is very aware of our age and strength Varied exercises suitable for all fitness levels (only 4 returns)
-------------	--------------	--	--	---	---	---	----	---

Ageing & Exercise

The Researcher

Having taken early retirement from a busy language teaching post I wondered how I was going to stay fit and healthy. The answer was to train as an exercise instructor and work with people like myself. Then I realised the need to encourage more people to engage in exercise and that I was probably well placed to be able to do it. First I needed to understand more about the groups. What brought people to exercise and what kept them there? What was the experience that led their choice?

The Participants

Mainly women aged between 55 and 90

The Classes

County council Adult Learning scheme
Hour long sessions in village halls etc.
Classes in Exercise to Music, Pilates and Tai chi for Arthritis

Why is the study important?

- . World Health Organisation reports a quarter of non-communicable diseases are associated with sedentary behaviour
- . Inform policy on encouraging exercise engagement by looking at what works
- . Changes in Adult Learning policy could threaten the future of the scheme.

Methodology

- . Ten interviews with individuals
- . Nine focus groups
- . Discussion 'on the move'
- . Vox pops
- . Lots of Participant Observation
- . Access to administrative documents

What matters

Things we like	Things we don't like
<ul style="list-style-type: none">. Having fun. Friendly atmosphere. Options to work at own pace. Common purpose. Accessibility	<ul style="list-style-type: none">. Being shouted at. Loud music. Paperwork. Expensive fees. Intimidating atmosphere

I can walk to class—that makes the exercise last a bit longer.
Carol , 67

I don't want to go home feeling I don't like myself very much because the instructor is too fit
Rose, 70

Findings and application

There has to be more than just the exercise to make you want to keep going.....it's a package
Rosemarie, 69

Features of the 'package' have been found to differ with the type of exercise chosen, but common to all of them are

- . Enjoyment
- . Sense of purpose
- . Sociable atmosphere

The research is currently pursuing the nature and importance of talk before, during and after the exercise session.

Sue.Stuart@bucks.ac.uk

